CLINICAL PROFILE OF PATIENTS ATTENDING THE OBSTETRIC MEDICINE CLINIC IN A TERTIARY CARE CENTRE IN SOUTH INDIA: A DESCRIPTIVE STUDY

A dissertation submitted in partial fulfillment of the rules and regulations for MD General Medicine examination of the Tamil Nadu Dr. M.G.R Medical University, Chennai, to be held in May 2018

DECLARATION

This is to declare that the dissertation titled "Clinical profile of patients attending the Obstetric Medicine Clinic in a tertiary care centre in South India: A descriptive study" which is submitted by me in partial fulfillment towards M.D General Medicine degree Examination of the Dr. M.G.R. University, Chennai to be held in May 2018 comprises only my original work and due acknowledgements has been made in text to all materials used.

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CERTIFICATE I

This is to certify that the dissertation "Clinical profile of patients attending the Obstetric Medicine Clinic in a tertiary care centre in South India: A descriptive study" is a bonafide work of Dr. Dan Mathew Luke carried out under my guidance towards the partial fulfillment of the rules and regulations for M.D. General Medicine degree Examination of the Tamil Nadu Dr. M.G.R. University, Chennai to be held in 2018.

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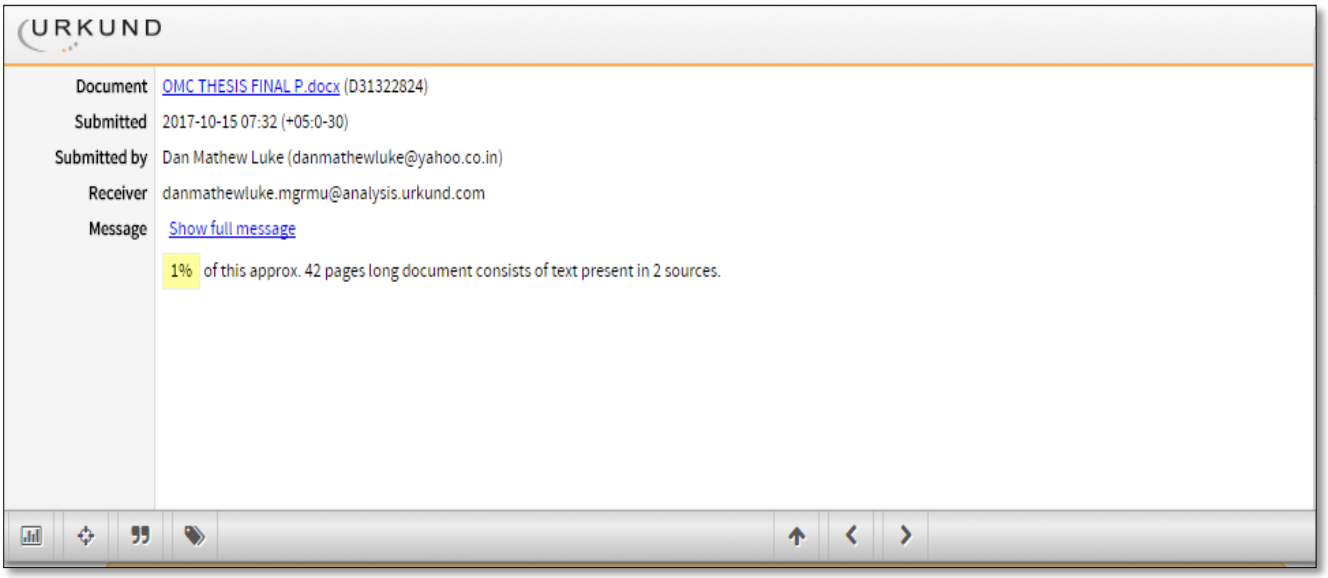

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INTRODUCTION

Maternal and child morbidity and mortality directly due to pregnancy, child birth and the immediate postpartum have reduced due to improved obstetric care. From 1990 to 2015, the global maternal mortality ratio declined by 44 per cent – from 385 deaths to 216 deaths per 100,000 live births, according to UN interagency estimates. This translates into an average annual rate of reduction of 2.3 per cent. While impressive, this is less than half the 5.5 per cent annual rate needed to achieve the three-quarters reduction in maternal mortality which was targeted for 2015 in Millennium Development Goal. [1, 2]

An estimated 800 women die every day from pregnancy and pregnancy related complications worldwide. Maternal deaths, which have been described, are only the tip of the iceberg. For every woman who dies of pregnancy related causes, upto thirty others experience acute or chronic morbidity, often with permanent sequelae that affect their ability to function normally. Totally 99% of these maternal deaths and complications occur in developing countries and most are avoidable. Half of those deaths are due to medical causes. Like the obstetric population in high resourced settings, women of childbearing age in developing countries are increasingly overweight or obese and have preexisting medical conditions. This trend is in keeping with that seen in the Global Burden of Disease (GBD) 2010 which identified that these demographic changes are driving up premature deaths and disability from non-communicable diseases (mainly cardiovascular and respiratory diseases, cancer and diabetes).[3]

The very birth of Obstetric Medicine is the response of the times to meet to this exigency. My study aims at learning the importance of Obstetric Medicine as seen from the perspective of a tertiary referral hospital in South India, namely Tamil Nadu. This requires a detailed assessment of the clinical profile and maternal and fetal outcomes of patients being referred to the Obstetric Medicine clinic. The patients who are seen in this clinic are mostly from the near districts and do not even represent the state as a whole. However, it is a pointer towards the need for a centrally sponsored comprehensive Government of India project for a more inclusive discerning study. Direct and indirect causes of maternal morbidity and mortality in different geographical, economic and social regions of this vast country have to be done to create a data base for future targeted medical intervention.

AIM

To study the clinical profile and maternal and foetal outcomes of patients attending the Obstetric Medicine clinic in a tertiary care centre in South India

OBJECTIVES

A. To study the common reasons for referral to the Obstetric Medicine Clinic
B. To ascertain the frequency of common medical disorders in pregnancy
C. To determine the correlation between age and frequency of medical disorders
D. To study the maternal and foetal outcomes of patients referred to the Obstetric Medicine Clinic

REVIEW OF LITERATURE

MATERNAL MORBIDITY AND MORTALITY

GLOBAL SCENARIO

Globally, the nature of maternal mortality and morbidity is shifting from direct obstetric causes to an increasing proportion of indirect causes due to chronic conditions and ageing of the maternal population. Obstetric medicine can address an important gap in the care of women by broadening its scope to include medical colleges, communities and countries that do not yet have established obstetric medicine training, education and resources. Between 2003 and 2009, hemorrhage, hypertensive disorders and sepsis were responsible for more than half of maternal deaths worldwide (Figure 1). More than a quarter of deaths were attributable to indirect causes. These analyses should inform the prioritisation of health policies, programs, and funding to reduce maternal deaths at regional and global levels.[4] Non-communicable diseases in pregnancy are becoming increasingly important in contributing to death and poor health. Changes in the patterns and distribution of these conditions mean that we need new perspectives and ways of dealing with these challenges for the future like setting up of Obstetric Medicine clinic.[5]

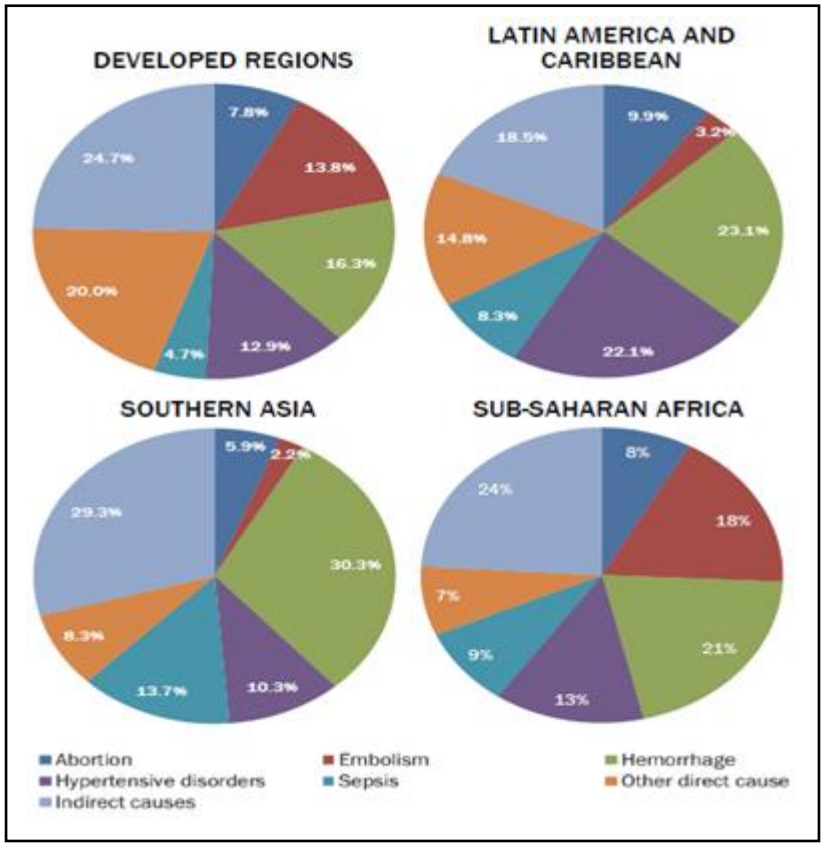
The UK confidential enquiry into maternal deaths identified poor management of medical problems in pregnancy to be a contributory factor to a large proportion of indirect maternal deaths. Maternal (obstetric) medicine is an exciting subspecialty that

encompasses caring for both women with preexisting medical conditions who become pregnant, as well as those who develop medical conditions in pregnancy. Physician training has limited exposure to medical problems in pregnancy. Therefore the role of the obstetric physician is to ensure that physicians with adequate expertise attend joint physician–obstetrician clinics.[6]

The leading direct causes of the estimated 196 maternal deaths per 100,000 live births globally are postpartum hemorrhage, the hypertensive disorders of pregnancy, obstructed labour, unsafe abortion and obstetric sepsis. Of the Sustainable Development Goals, one (Sustainable Development Goal 3.1) specifically addresses maternal mortality; by 2030, the goal is to reduce the global maternal mortality ratio to less than 70 per 100,000 live births.[7] Previous data indicate the need for a call to action for adequate diagnosis and care of medical diseases in obstetric care.

Torres and his colleagues, in a study in Mexico, applied a new method to data from an eight-year study period, and found that maternal deaths from direct obstetric causes declined from 46.4 to 32.1 per 100,000 live births during the study period and that maternal deaths from indirect causes remained steady with 12.2 deaths per 100,000 live births in 2006 compared with 13.3 deaths per 100,000 live births in 2013.[14] Menendez et al. in their 2008 study of the causes of maternal mortality in a tertiary hospital in Mozambique found that infectious diseases such as HIV/AIDS, pneumonia, malaria and meningitis accounted for at least half of all maternal deaths.[15]

Figure 1: Estimated distribution of causes of maternal mortality by region, 2003-2009

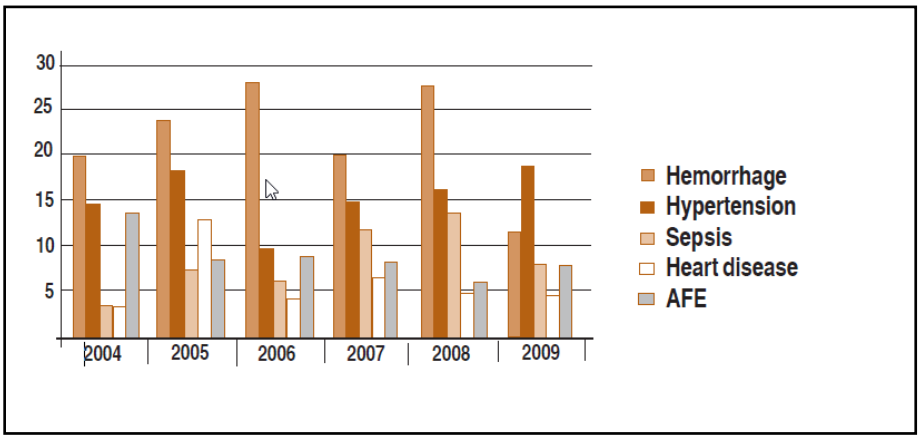


Adapted from Global causes of maternal death: a WHO systematic analysis. The Lancet Global Health 2014 June 2(6), e323-e333

INDIAN SCENARIO

The leading causes of maternal deaths identified during the period 2004-09 by the Confidential Review of Maternal Deaths (CRMD) in Kerala were hemorrhage, hypertension, amniotic fluid embolism, heart disease and sepsis (Figure 2). [8]

Figure 2: Percentage contribution to the maternal deaths



Adapted from Kerala Federation of Obstetrics and Gynecology (KFOG).Second report of confidential review of maternal deaths, Kerala. Why Mothers Die, Kerala 2006–2009. Kerala: KFOG, 2012. (AFE: Amniotic fluid embolism)

As per the maternal death review report analysis of India, the causes of maternal mortality are hematological (26%), hypertensive disorders (12%), sepsis (8%), obstructed labour (3%), abortion (2%) and others(49%).[9] Between 2003 and 2012, records of maternal death cases in the Christian Medical College, Vellore were retrospectively reviewed. It was found that 32.53% of maternal deaths were because of some type of infection as the primary cause. In this study, metritis with pelvic cellulitis, septic abortions, tuberculosis, malaria, scrub typhus and H1N1 influenza (influenza A virus subtype) were among the most commonly encountered causes of maternal death due to infections (Table 1). Control of these diverse community-acquired infections holds the key to a reduction in maternal mortality along with the promotion of clean birthing practices.[10]

Table 1: Infectious causes of maternal mortality

Infection	No. (%)
Pregnancy-related infection	34 (16.03%)
Metritis with pelvic cellulitis	25 (11.79%)
Necrotizing fasciitis	1 (0.47%)
Chorioamnionitis	1 (0.47%)
Septic abortion	7 (3.3%)
Pregnancy-unrelated/Incidental infection	35 (16.50%)
Tuberculosis	10 (4.7%)
H1N1 influenza	6 (2.8%)
Scrub typhus	6 (2.8%)
Malaria	6 (2.8%)
Dengue hemorrhagic fever	3 (1.40%)
Typhoid	1 (0.47%)
Herpes zoster	1 (0.47%)
HIV with Pneumocystis carinii pneumonia	1 (0.47%)
Orbital cellulitis	1 (0.47%)
Hospital-acquired infection	15 (7.07%)
Ventilator-acquired pneumonia	15 (7.07%)
Total	84 (39.62%)

Adapted from Journal of Turkish German Gynecological Assoc. 2015.16(4):208-213.

Dedicated Obstetric Medicine (OM) units can aid in the management of varied maternal morbidity and prevent adverse maternal and fetal outcomes. In an unpublished study from Christian Medical College for a period of 1 year from July 2015 to June 2016 studying the clinical profiles of patients treated under an Obstetric Medicine Unit, the outpatient consultations were for infections (28%), gestational

diabetes mellitus (17%), hypertension (16%), thyroid disorders (12%) and others were for evaluation of dyspnea, palpitation, anemia, connective tissue disorder, hepatitis and seizure disorder.[11]

There continues to be a large disparity between the maternal mortality in developed compared with that of developing nations.[12] In India, the mortality in the urban centers differ from that in the rural regions. Based on 2004-2006 SRS(Sample registration system) national Maternal mortality rate (MMR) estimates of 254 deaths per 100,000 live births, the estimated rural areas of poorer states had the highest MMR of 397 compared to the lowest MMR of 115 in urban areas of richer states .[13]

The complications leading to maternal death can occur without warning at any time during pregnancy and childbirth. Most maternal deaths can be prevented if births are attended by skilled health personnel who are regularly supervised, have the proper equipment and supplies and can refer women in a timely manner to emergency obstetric care when complications are diagnosed. Complications require prompt access to quality obstetric services equipped with lifesaving drugs, including antibiotics, and the ability to provide blood transfusions needed to perform caesarean sections or other surgical interventions.

Coexistent medical illness is an important contributor to morbidity and mortality. A WHO study on trends in maternal mortality showed that the risk that non-communicable diseases could undermine recent progress in improving maternal survival. Indirect maternal deaths result from an often preexisting disease made worse by pregnancy and include non-communicable conditions, such as type 2 diabetes and

cardiovascular disorders, as well as infectious and parasitic diseases such as HIV infection, tuberculosis or hepatitis.[2]

Information regarding the role of infectious and non-communicable disease in pregnancy in India remains largely unknown as mass surveys to this regard are few and patchy in its existence. India accounts for more than 20% of the global maternal and child deaths. The causes of maternal deaths have been classified according to major groups in the ICD10 classification of diseases. Quantitative estimates of causes were made from the translated sub categories of ICD code. A total of 26 maternal deaths were reported from Assam, 73 from Bihar, 7 from Maharashtra, 36 from Rajasthan and 29 from Tamil Nadu during the year 2003. Distribution of causes of maternal deaths shows that, conditions pertaining to pregnancy, childbirth and puerperium were the leading causes of maternal mortality in Bihar (40%), Maharashtra (100%) and Rajasthan (79%). In Assam, diseases of circulatory system and diseases of digestive system were the most common causes of maternal mortality accounting for about half of the total maternal deaths followed by external causes of morbidity and mortality (21%) and certain infectious and parasitic diseases (18%).

Diseases of circulatory system were the most common causes of deaths in Tamil Nadu leading to 27% of maternal deaths followed by infectious and parasitic diseases (17%), injury, poisoning and certain other consequences of other causes (15%) and neoplasms (11%). In Bihar, the other important causes of maternal deaths were deaths due to diseases of blood and blood forming organs (14%), certain infectious and parasitic diseases (15%), deaths due to symptoms, signs and abnormal clinical and

laboratory findings, not classified elsewhere (11%), deaths by injury, poisoning and external causes of morbidity and mortality (8% together) and disease of genitourinary system (4%). In Rajasthan, the second most important cause of maternal death after cause related to pregnancy, childbirths and puerperium were disease of blood and blood forming organs (8%), deaths due to certain infectious and parasitic diseases (5%), deaths due to symptoms, signs and abnormal clinical and laboratory findings, not classified elsewhere (3%), external causes of morbidity and mortality (3%) and disease of circulatory system (2%). Conditions during pregnancy, childbirth and puerperium were the single cause of maternal death in Maharashtra.[16]

The medical diseases that coexist, precipitated or exacerbated by pregnancy, are important determinants of maternal and fetal mortality and morbidity. Diseases can exist in isolation or in combination requiring careful and astute management for improving the maternal and child heath during and immediately after pregnancy. Obstetric Medicine in its evolved state and widespread implementation may have long term implications in health of the subjects involved.

SCOPE OF OBSTETRIC MEDICINE

MATERNAL NUTRITION

The metaanalysis of nutritional intervention studies with balanced protein energy supplementation during pregnancy shows a 34% and 38% risk reduction for small for

gestational age (SGA) babies and stillbirths respectively.[17] Nutritional iron deficiency anemia is the most common cause of anemia and is associated with increased maternal and perinatal morbidity and mortality, and long term adverse effects in the newborn.[18] Studies show a significantly higher risk of LBW and preterm birth with anemia in the first or second trimester. Iron supplementation during pregnancy significantly lowers the incidence of LBW but has no effect on the incidence of preterm or SGA birth.[19,20] Recent systematic review and meta-analysis including some new studies concluded that vitamin D insufficiency is associated with an increased risk of gestational diabetes, preeclampsia and SGA and LBW infants.[21] Low circulating levels of vitamin B12 in folate replete mothers are associated with 'thin fat' offspring and high prevalence of insulin resistance, indicating a future risk of type 2 diabetes.[22]

OBESITY

Obesity is associated with an increased risk of preeclampsia, induction of labour, postpartum hemorrhage, intensive care admission, GDM, thrombosis, shoulder dystocia and caesarean section (C-section).[31] It is also associated with maternal infection, prolonged hospital stay and instrumental delivery.[23]

Obese women have a 3.5 fold increase in the rate of infection compared with women of an ideal BMI. Wound infections are common, and their rate increases with worsening obesity.[24]

HYPERGLYCAEMIA IN PREGNANCY

Worldwide, one in six pregnancies may be associated with hyperglycemia, 84% of which involve GDM (Gestational Diabetes Mellitus).[18] In 2013, 16.8% live births (21.4 of 127 million) were associated with hyperglycemia in pregnancy and 16% of these were due to overt diabetes in pregnancy. This does not account for pregnancies ending in spontaneous abortions, stillbirths or intrauterine deaths that may have been associated with hyperglycemia proven or otherwise. In high risk groups, up to 30% of pregnancies may involve diabetes.[25, 26, 27]

A 2013 systematic review and metaanalysis of randomized trials for the US Preventive Services Task Force found that appropriate management of GDM resulted in reductions in preeclampsia (7.2% versus 11.7%), birth weight >4000 g and shoulder dystocia.[28]

Macrosomia was more likely when GDM was present in the absence of obesity (14.4%) than when obesity was present in the absence of GDM (12.4%) and the independent effects of GDM and obesity were additive (21.7%).[29]

In a 2012 systematic review of four randomized trials (n = 543 women) of women with one or more elevated glucose levels on a 100 g three hour oral glucose tolerance test who did not meet standard criteria for GDM, glucose monitoring and medical nutritional therapy (with or without insulin) resulted in a reduction in delivery of large for gestational age infants compared with usual care.[30]

HYPERTENSION IN PREGNANCY

DEFINITION

Hypertension in pregnancy is defined as a blood pressure of greater than or equal to 140mmHg (systolic) or 90 mmHg (diastolic) on at least two measurements, ideally separated by a period of rest. Severe hypertension is defined as a blood pressure of greater than 160–170/110 mmHg. Systolic hypertension of greater than 180 mmHg is a medical emergency.[32]

IMPACT OF HYPERTENSION ON PREGNANCY

Hypertensive disorders of pregnancy (HDP) complicate an estimated 3 to 10% of pregnancies and causes 30,000 maternal deaths annually. Approximately 30% of all maternal near miss events will be due to HDP with near miss events complicating about 420/100,000 deliveries. Of the estimated 2.6 million third trimester stillbirths annually, approximately 16% occur in pregnancies complicated by hypertension. Of particular importance to the global health community is the fact that 11% of stillbirths are associated with pregnancies complicated by chronic hypertension, while only 5% are associated with preeclampsia (presenting as either preeclampsia or eclampsia). It has been estimated that the hypertensive diseases precede 10% of early neonatal deaths (8/1000 live births) and a significant proportion of late neonatal deaths (3/1000 live births).[33-38]

CLASSIFICATION OF HYPERTENSION IN PREGNANCY

Hypertensive disorders of pregnancy can be subclassified into four groups – chronic hypertension, gestational hypertension, preeclampsia and superimposed preeclampsia in the setting of chronic hypertension, as laid out in the ACOG (American Congress of Obstetricians and Gynecologists) guidelines.[39]

The International Society for the Study of Hypertension in Pregnancy (ISSHP) has published guidelines on diagnosis to establish global unity of meaning in referring to the various hypertensive disorders of pregnancy, with the most recent guidance being released in 2014. They include an additional category of white coat hypertension.[32] Although each condition increases the risk of maternal and neonatal morbidity, the greatest risks are associated with a diagnosis of preeclampsia, either de novo or in the setting of chronic hypertension.[40,41]

The diagnostic criteria for these disorders vary somewhat among published international guidelines, particularly between the research and clinical setting, in the discrimination between preeclampsia and gestational hypertension, and in setting the definition of severe preeclampsia.[32,42-44]

HYPERTENSION IN PREGNANCY - CONTRIBUTION OF OBSTETRIC MEDICINE

SCREENING FOR PREECLAMPSIA

Preeclampsia is a serious disease and it is likely that early identification of those at risk would allow targeted surveillance and intervention, in order to improve the

pregnancy outcomes for both mother and fetus. Low dose aspirin started in the first trimester in high risk women may reduce the risk of preeclampsia by up to 50%[45] and may improve associated fetal and maternal outcomes.[46] No other agents tested (progesterone or Vitamins D and E) have shown a reduction in risk of preeclampsia.[47] Calcium supplementation reduces the risk only in women who are deficient in dietary calcium.[48] With the introduction of aspirin as a prophylactic agent there is a package of intervention – aspirin and increased ultrasound and blood pressure monitoring – that can reduce the risk of preeclampsia and increase the chances of early detection in women determined to be at high risk (Table 2).

Table 2: Maternal risk factors for preeclampsia (NICE, WHO, ACOG and SOGC)

NICE (2010)*	**WHO (2011)**	**ACOG (2013)**	**SOGC (2014)***
Previous HDP	Previous preeclampsia	Previous preeclampsia	**Previous preeclampsia**
Chronic kidney disease	Renal disease	Chronic renal disease	**Preexisting renal disease**
Autoimmune disease (SLE/APS)	Autoimmune disease	SLE	**APS**
Type 1 or type 2 diabetes	Preexisting diabetes mellitus	Preexisting diabetes mellitus	**Preexisting diabetes mellitus**
Chronic hypertension	Chronic hypertension	Chronic hypertension	**Preexisting hypertension**
Multiple pregnancy	Multiple pregnancy	Multiple pregnancy	**Multiple pregnancy**
Nulliparity		Primiparity	Nulliparity
Maternal age ≥40 years		Maternal age ≥40 years	Maternal age ≥40 years
Interpregnancy interval ≥10			Interpregnancy interval ≥10
BMI ≥35 kg/m^2 at booking		Obesity	Overweight/Obesity

Family h/o preeclampsia		Family h/o preeclampsia	Family h/o preeclampsia
			Family h/o early onset cardiovascular disease
			Lower maternal birthweight and/or preterm delivery
		History of thrombophilia	Heritable thrombophilias
			↑ pre-pregnancy triglycerides
			Nonsmoking
			Cocaine, methamphetamine
			Previous miscarriage at ≤10 weeks with same partner
			New partner
			Short duration of sexual relationship with current partner
		In vitro fertilization	Reproductive technologies
			SBP ≥130 or DBP ≥80 mmHg at booking
			Vaginal bleeding in early pregnancy
			Gestational trophoblastic disease

Adapted from Integrated Blood Pressure Control 2016:9 79–94 Current best practice in the management of hypertensive disorders in pregnancy

*Women are at increased risk if they have one of the risk factors in bold or ≥2 of the other risk factors

ASTHMA IN PREGNANCY

Asthma has been described as a potentially serious medical problem that occurs during pregnancy and is seen in approximately 8% of pregnant women.[49] Women with asthma have been reported to have higher risks of several complications of pregnancy which includes intrauterine growth restriction, preeclampsia, preterm birth, infants with low birth weight or infants with congenital malformations and perinatal death than women without a history of asthma.[50-58] There is a strong association between poor asthma control during pregnancy and increased risks.[59-63] Treatment also may reduce serious risks to the mother resulting from uncontrolled asthma, including death. Potential adverse effects of medications on the foetus have to be kept in mind while treating asthma in pregnancy. The course of asthma may improve, worsen, or remain unchanged during pregnancy.[64,65]

PNEUMONIA IN PREGNANCY

Community acquired pneumonia (CAP) carries substantial morbidity and mortality particularly so in young adults.[66] In the pregnant patient, pneumonia is the most frequent cause of fatal non-obstetric infection.[67]

CHANGES THAT MAY PREDISPOSE A PREGNANT WOMAN TO COMMUNITY ACQUIRED PNEUMONIA

Changes in cellular immunity - This include decreased lymphocyte proliferative response, especially in the second and third trimesters, decreased natural killer cell activity, changes in T cell populations with a decrease in numbers of circulating helper T cells, reduced lymphocyte cytotoxic activity, and production by the trophoblast of substances that could block maternal recognition of fetal major histocompatibility antigens.[68-72]

Hormonal changes during pregnancy - including progesterone, human chorionic gonadotropin, alpha-fetoprotein and cortisol - may inhibit cell mediated immune function.[71]

Anatomical alterations - The enlarging uterus causes elevation of the diaphragm by up to 4 cm and splaying of the thoracic cage. A 2.1 cm increase in the transverse diameter of the chest and a 5 to7 cm increase in the circumference of the thoracic cage has been reported.[73] These changes may decrease the mother's ability to clear secretions. The decrease in functional residual capacity, increase in oxygen consumption, and increase in lung water that occur during pregnancy add to the vulnerability of the lung to injury from infection.

Obstetric and anaesthetic interventions, including endotracheal intubation, pose further risks, not least from aspiration pneumonia.[74]

INCIDENCE

A very high incidence was reported in the years before 1965 ranging from 6.3 per 1000 deliveries to 8.5 per 1000 deliveries.[75,76] This had decreased in the 1970s and early 1980s to 0.44 to 0.78 per 1000 deliveries, presumably due to the introduction of antibiotics and improvements in obstetric care.[77,78]

More recently, an incidence of 1.2 to 2.7 per 1000 deliveries has been reported.[79-81] It has been proposed that this increase in incidence is a reflection of the higher proportion of pregnant women with chronic medical conditions.[79]

MORTALITY

Pneumonia is the third most frequent cause of indirect obstetric death in North America.[82] The reported maternal mortality of 0 to 4% in recent studies, approximates the mortality from CAP in hospitalised non-pregnant adults.[83,84] Mortality from pneumonia in pregnancy is similar to rates in nonpregnant adults.

FETAL OUTCOME

Mothers with pneumonia are significantly more likely to deliver before 34 weeks gestation, with preterm delivery occurring in up to 43% of cases.[85] Infants born to mothers with pneumonia weigh significantly less.[85] One study found a difference of 150 g in the birth weight of infants born to mothers with pneumonia compared with controls.[81] The frequency of low birth weight infants (2500 g or less) was higher in cases than in controls (16% v 8%).

BACTERIAL AND ATYPICAL PATHOGENS

Streptococcus pneumoniae is the most common organism identified, followed by *Haemophilus influenzae*. Infection with Legionella species has been documented but is rare. Treatment with erythromycin has proved successful.[86] Mycoplasma pneumonia might be expected to be more common, particularly in this age group. Human infection with Coxiella burnetii (Q fever) results mainly from aerosols which are generated by farm animals (Table 3).

Table 3: Pathogens implicated in pneumonia during pregnancy: from four studies

Pathogen	N=161 (%)
Streptococcus pneumonia	28 (17%)
Haemophilus influenzae	9 (5.5%)
Mycoplasma pneumonia	5 (3%)
Legionella sp	2 (1.2%)
Staphylococcus aureus	2 (1.2%)
Influenza A virus	2 (1.2%)
Others	14 (9%)
Unknown	99 (61%)

Adapted from W S Lim, J T Macfarlane, C L Colthorpe .Pneumonia and pregnancy.Thorax 2001;56:398–405

INFLUENZA VIRUS

There are three antigenically distinct types of influenza myxoviruses that cause human disease: type A, B and C. Type A is usually associated with epidemic disease and, historically, has been implicated in causing severe disease in pregnant patients.

Mortality was highest in women in the third trimester.[87] Post mortem studies showed that pregnant women most commonly died from fulminant primary viral pneumonia

whereas non pregnant patients died from secondary bacterial infection.[88] Influenza A virus can pass through the placenta.[89] Whether influenza can cause congenital malformations is under debate. Circulatory defects and central nervous system malformations have been described.

Pramanick A, Peter J V et al in 2009, conducted a retrospective cross sectional study on 566 women (79 pregnant/puerperal, 487 nonpregnant) who presented to a tertiary care hospital with influenza-like illness. In the pregnant/puerperal cohort, factors associated with death included delayed presentation, need for ICU admission, need for ventilation and renal failure. The perinatal mortality rate was 55.5/1000 births compared with 33.5/1000 births in the hospital overall during the study period.[90]

IMPACT OF HIV INFECTION

It was difficult to obtain data on HIV related lung infections in the pregnant patient. However, data is available for general patients. Whether this can be extrapolated to those who are pregnant remains to be seen. Bacterial infections are the most common respiratory complications in patients with HIV infection.[91]

In the cohort studied in the Pulmonary Complications of HIV Infection Study, the incidence of bacterial pneumonia was 5.5 per 100 person years compared with a rate of 5.1 per 100 person years for Pneumocystis carinii pneumonia (PCP).[92] Others have reported a bacterial pneumonia rate of up to 12.5 per 100 person years, significantly higher than in HIV negative patients.[93, 94]

The CD4+ lymphocyte count is strongly associated with the occurrence of both PCP and bacterial pneumonia, with infection becoming increasingly likely at CD4+ lymphocyte counts below 500/mm^3.[94] Bacteraemia rates of about 30% are not uncommon in HIV positive patients.[92,95] Generally, *S. pneumoniae* is the most common organism identified, although a recent series found *P. aeruginosa* to be more common.[95]

TUBERCULOSIS IN PREGNANCY

In 2012, an estimated 2.9 million women had tuberulous illness (TB) and 410,000 women died. Of the TB deaths in HIV infected individuals, 50% were in women. The African and Southeast Asian regions accounted for 68% of the TB cases in women, and almost 90% of the TB deaths in women were in Africa. More than half of the estimated TB cases in women went undetected compared to less than 40% in the general population. Coinfection with HIV worsens outcomes, and it is estimated that TB in pregnant women living with HIV increases the maternal and infant mortality by almost 300%, an especially significant public health issue in areas of high TB prevalence. Pregnant patients appear more likely to have unilateral, noncavitary, smear negative disease.

Risk factors in pregnancy that should prompt screening for TB include HIV infection, close contact with a person known or suspected to have active TB and medical risk factors known to increase the risk of disease if infected (such as diabetes

or immunosuppression). The other risk factors are medically underserved status, low income, alcohol addiction, intravenous drug addiction, residency in a long-term care facility (e.g. correctional institutions or mental health institutions), homelessness, health professionals working in a high risk health care facility and birth in or emigration from a country with high TB prevalence.[96, 97]

SEPSIS IN PREGNANCY

DEFINITION

Puerperal sepsis is defined as 'infection of the genital tract occurring at any time between the rupture of membranes or labour, and the 42nd day postpartum, of which two or more of the following are present: pelvic pain, fever ≥38.5º C, abnormal vaginal discharge, abnormal smell of discharge, and delay in the rate of reduction of size of uterus (less than 2 cm a day during the first 8 days).

ETIOLOGY

In the 2006–2008, Confidential Enquiries into Maternal Deaths, Lancefield classification Group A *Streptococcus* (GAS) or *Streptococcus pyogenes* was a significant cause of maternal death. Obstetric interventions, obesity, maternal age over 35 years, artificial reproduction and multiple pregnancies and low socioeconomic status are risk factors. It was reported that 13 out of the 29 maternal deaths were caused by GAS. In a study on maternal mortality in the Netherlands, GAS accounted for 42.9% (9 out of 21) of direct maternal deaths from sepsis and 31.8% (14 out of 44)

of cases of maternal morbidity from sepsis. The reported case fatality rate for GAS was 14.3%. About 5 to 30% of the population are thought to be asymptomatic carriers.[98-101]

Obese women have a 3.5 fold increase in the rate of infection compared with women of an ideal BMI. Wound infections are common, and their rate increases with worsening obesity. Caesarean section carries a five to 20 fold increased risk of infectious morbidity compared with vaginal birth. Wound infections, urinary tract infections, pyelonephritis, respiratory tract infections and mastitis are common. Emergency caesarean section, prolonged rupture of membranes over 18 h, increased intrapartum vaginal examinations (e.g. over 7) and absence of antibiotic prophylaxis further increase risks.[102-110]

THYROID DISEASE IN PREGNANCY

INTRODUCTION

Thyroid disorders are common in pregnancy and related to maternal and fetal complications. Hyperthyroidism is seen in 0.1 to 0.4% of pregnant women. Approximately 2 to 3% of pregnant women are hypothyroid during pregnancy, 0.3 to 0.5% have manifest hypothyroidism, 2 to 2.5% exhibit subclinical hypothyroidism.[111] About 5 to10% of women are positive for thyroid antibodies. These patients have an increased risk of developing thyroid insufficiency during pregnancy.[112]

Subclinical hyperthyroidism is not associated with adverse outcomes. Autoimmune thyroid disease appears to be associated with an increased risk of miscarriage and preterm delivery. [113]

PHYSIOLOGY OF MATERNAL AND FETAL THYROID IN PREGNANCY

The thyroid undergoes physiological enlargement with increase in vascularisation. Beta-human chorionic gonadotropin (β hCG) causes thyroid stimulation as there is structural analogy with thyroid stimulating hormone (TSH), during the first trimester.[114] Pregnant women therefore have lower serum TSH concentrations than non-pregnant women.[115]

Estrogen stimulation increase circulating levels of thyroid binding globulin (TBG) by increasing hepatic synthesis. Iodine availability is reduced because of increased maternal renal clearance, fetal intake and placental metabolism.[116] In addition, estrogen prolongs the half life of TBG from 15 minutes to 3 days, a few weeks after conception and this level out by mid-gestation.[117]

In early pregnancy following the rise in TBG, total concentrations of thyroxine (T4) and of triiodothyronine (T3) increase by 30 to100% greater than pre pregnancy, and plateau early in the second trimester. Changes in free hormone during pregnancy are controversial, though pregnant women in general have lower free hormone concentrations at term than nonpregnant women.[118,119]

Fetal thyroid begins concentrating iodine and synthesising thyroid hormones after 12 weeks of gestation; before this time any need of thyroid hormones is supplied by

maternal reserves, in order to promote the physiological fetal brain development.[120,121]

HYPOTHYROIDISM

Hypothyroidism occurs in 2.5% of pregnancies;[122,123] however, the frequency of overt hypothyroidism is thought to be between 0.2 and 1.0%.[124,125] Hypothyroidism is defined as high TSH with a low FT4 level.

Iodine deficiency is the most common cause. In areas where iodine intake is sufficient the frequent cause is autoimmune thyroiditis. Other causes are previous thyroidectomy, radioiodine therapy, the use of drugs, congenital hypothyroidism, pituitary or hypothalamic disease and immunoglobulin binding to the TSH receptor, blocking its activity.

Haddow et al. in 1999 described reduced intelligence quotient (IQ) in babies born from hypothyroid mothers. This retrospective study corroborates the association between hypothyroidism and increase risk of impaired neurodevelopment in the offspring.[126] Symptoms of hypothyroidism can often be masked by the hypermetabolic state of pregnancy.

Gestational hypertension, placental abruption and postpartum haemorrhage have been shown to be increased in some, but not all, studies. The other obstetrical complications are increased risk of spontaneous miscarriage, stillbirth, perinatal death, preterm delivery, fetal distress and increased frequency of low birth weight infants.[127-129,112]

Abalovich et al. in 2002 showed that levothyroxine (LT4) treatment prevented fetal loss. Fetal loss was 4% in the adequately treated group versus 31% in inadequately treated group.[130] There was no increase in reported obstetrical and neonatal complications in treated hypothyroid women in a study by Tan et al. in 2006.[131] Negro et al. confirmed this in his study in 2010 in which adverse events were noted in women with subclinical and overt hypothyroidism. Untreated thyroid dysfunction patients had a significantly higher rate of complications compared with those receiving treatment.[132]

SUBCLINICAL HYPOTHYROIDISM

Subclinical hypothyroidism (SH) is the most frequent thyroid disease occurring in pregnancy.[116,124,125] Subclinical hypothyroidism is defined as a normal FT4 levels with high TSH. The prevalence of SH varies between 1.5 and 4.0%.[123] SH causes several obstetrical complications.[112,116]

Allan et al. in 2000, observed that TSH levels greater than 6.0 mIU/L during pregnancy was associated with a higher rate of fetal death than controls (3.8% vs 0.9%).[122] Benhadi et al. in 2009, found a correlation between pregnancy loss and increased TSH values. In this study the incidence of child loss increased by 60% for every doubling in TSH concentration.[133]

Cleary-Goldman et al. in 2008 and Männistö et al. in 2009 showed that maternal and fetal complications were associated with autoimmunity,[134] independent from thyroid function.[135] Negro et al. in 2010 showed that in the first trimester women with TSH

level between 2.5 and 5.0 mIU/L, had an increased rate of pregnancy loss of 6.1 vs 3.6% respectively, compared with those having TSH levels less than 2.5 mIU/L.[132]

THYROID AUTOIMMUNITY

Thyroid antibodies positivity is the most common autoimmune disorder during pregnancy and is seen in around 10% of women of childbearing age.

Stagnaro-Green et al. in 1990 showed an association between pregnancy loss and thyroid antibodies. The course of 550 pregnancies were followed up and they found that patients who were positive for Thyroglobulin antibodies (TgAb) or TPOAb had a 2 fold increase in the risk of pregnancy loss (17% vs 8.4%).[136] A metaanalysis in 2011 including 12,126 patients, found that women with thyroid antibodies had a 4 fold increased risk of miscarriage. There was a 1.8 fold increased risk according to case control studies.[137]

Glinoer et al. published the association of autoimmune disease and preterm birth.[128] Ghafoor et al. found that women with thyroid antibodies have a 4 fold risk of preterm delivery.[138] In a larger study by Haddow et al, involving about 10,000 patients, a weak association with preterm delivery was demonstrated.[139] Iijima et al. did not find a significant association.[140]

Negro et al. in 2006 studied 984 patients in the first trimester of pregnancy. There were 11.7% patients with thyroid autoimmunity. They were divided into two groups, one of which was treated with levothyroxine.[141] Results showed a significantly decreased rate of pregnancy loss (3.5% vs 13.8%) and a lower rate of preterm delivery in the treated group than the untreated group (22.4% vs 7%).

The use of IVIG for the prevention of recurrent pregnancy loss, in women with thyroid antibodies were done in several small nonrandomized studies.[142- 144] The data on the use of levothyroxine or IVIG to prevent miscarriage rate are preliminary. One study showed an improvement in live birth compared with the control group (92% vs 0%), and in another comparing levothyroxine with IVIG, there was a higher rate of term delivery in the group treated with levothyroxine.

HYPERTHYROIDISM

The normal physiological changes of pregnancy can hide some of the signs and symptoms of hyperthyroidism. Hyperthyroidism is less common than hypothyroidism and is seen in around 0.2% of pregnancies. It is defined as an excessive production of thyroid hormones caused by immune or non immune thyroid disease.

Thyrotoxicosis at conception increases the risk for spontaneous abortion. Severe hyperthyroidism during pregnancy is associated with stillbirth, preterm delivery, intrauterine growth restriction, preeclampsia and heart failure.[145]

SUBCLINICAL HYPERTHYROIDISM

Subclinical hyperthyroidism affects upto 1.7% of pregnant women and is defined as a serum TSH concentration below the lower limit of reference range, with FT4 and FT3 concentrations within normal reference range.

Subclinical hyperthyroidism in pregnancy has not been found to be associated with adverse outcomes.[116]

SYSTEMIC LUPUS ERYTHEMATOSUS (SLE) IN PREGNANCY

INTRODUCTION

Fertility in SLE patients does not appear to be altered by disease itself; however, a decrease in ovarian reserve can occur in women exposed to cyclophosphamide. Active SLE at the time of conception is a strong predictor of adverse maternal and obstetrical outcomes. The largest observational study, including 385 pregnant lupus patients with inactive or mild or moderate disease at conception, found 81 percent of subjects had uncomplicated pregnancies. A study of 267 pregnancies in a cohort of lupus patients found that women with high disease activity compared with low disease activity in the first and second trimesters showed a threefold increase in pregnancy loss (miscarriages and perinatal mortality).[146-149]

Table 4 : Specific laboratory testing of SLE

No.	Investigation
1.	aPLs: Lupus anticoagulant (LA), immunoglobulin G (IgG) and IgM anticardiolipin (aCL) antibodies, and IgG and IgM anti-beta 2 glycoprotein (GP) 1 antibodies
2	Anti-Ro/SSA and anti-La/SSB antibodies
3.	Renal function (creatinine, urinalysis with urine sediment, spot urine protein/creatinine ratio)
4.	Complete blood count (CBC)
5.	Liver function tests
6.	Anti-double-stranded deoxyribonucleic acid (dsDNA) antibodies
7.	Complement (CH50, or C3 and C4)
8.	Uric acid

USE OF DISEASE MODIFYING DRUGS IN PREGNANCY

The use of NSAIDs in the third trimester may cause premature closure of the ductus arteriosus as well as other complications, and should be avoided during that time. Low dose aspirin can be safely used in pregnancy and is often indicated to reduce the risk of preeclampsia. Hydroxychloroquine (HCQ) should be continued during pregnancy in all patients with SLE, unless otherwise contraindicated. Several studies have demonstrated fewer disease flares and better outcomes in patients continuing HCQ during pregnancy, with no increase in adverse events or congenital malformations. Additionally, some data suggest a decrease in occurrence of congenital heart block in at risk fetuses of mothers with anti-Ro/SSA and anti-LA/SSB antibodies exposed to HCQ.[150-157]

COMPLICATIONS DURING PREGNANCY

Pregnancy and the postpartum period are associated with a higher rate of SLE disease flares, widely variable rates have been reported ranging from 25 to 60 percent.[158,159]

The following factors are associated with an increased risk of SLE flare during pregnancy[160-162]

1. Active disease during the six months prior to conception

2. A history of lupus nephritis

3. Discontinuation of HCQ

Pregnancy in the setting of SLE is associated with a higher risk of complications compared with healthy women. The largest study to evaluate maternal and pregnancy complications associated with SLE included 13,555 pregnancies. Women with SLE also had a two to four fold increased rate of obstetric complications including preterm labor, unplanned cesarean delivery, fetal growth restriction, preeclampsia and eclampsia. Patients with SLE also had a significantly higher risk of thrombosis, infection, thrombocytopenia, and transfusion.[163]

Another study found that increased rates of hypertension during pregnancy, preterm delivery, unplanned cesarean delivery, postpartum hemorrhage and maternal venous thromboembolism were all more frequent in women with SLE compared with pregnancies of women without SLE.[164]

ACQUIRED HEART DISEASE AND PREGNANCY

CARDIOVASCULAR PHYSIOLOGY IN PREGNANCY

Pregnancy is associated with several cardiocirculatory changes that can significantly impact underlying cardiac disease. These changes begin early in pregnancy (within the first five to eight weeks), reach their peak during the late second trimester and then remain relatively constant until delivery.[165] The cardiac output rises 30 to 50 percent above baseline during normal pregnancy. The degree of change is acutely influenced

by posture, as the cardiac output is higher when the pregnant woman is in the left lateral decubitus position, particularly in the latter part of pregnancy. The increased cardiac output is the result of changes in three important factors that determine cardiac performance: preload is increased due to the associated rise in blood volume; afterload is reduced due to the decline in systemic vascular resistance; and the maternal heart rate rises by 15 to 20 beats/min.[166-169]

COMPLICATIONS DURING PREGNANCY

To determine the risks and predictors of pregnancy related cardiac complications in women with heart disease, a retrospective study analysed outcomes of 221 women with heart disease who underwent 252 pregnancies (excluding miscarriages). The findings were then applied in a prospective study of 562 women with congenital or acquired cardiac disease or arrhythmias who had 617 pregnancies. The four predictors of cardiac events identified were:

a) Poor functional class (New York Heart Association [NYHA] class II to IV) or cyanosis

b) Previous cardiac event (eg, heart failure, transient ischemic attack, stroke) or arrhythmia

c) Left heart obstruction (mitral valve area of <2 cm^2, aortic valve area of <1.5cm^2, peak left ventricular outflow gradient >30 mmHg)

d) Left ventricular systolic dysfunction (left ventricular ejection fraction <40%).[170,171]

The actual rate of primary cardiac events (pulmonary edema, arrhythmia requiring treatment, stroke, cardiac arrest or death) was 13 percent overall, with 55 percent occurring antepartum. There was excellent agreement between the rates that were predicted and observed by risk score: 0 point (5 vs 4 percent), 1 point (27 vs 26 percent), and more than 1 point (75 vs 62 percent). Women with scores of 0 and no lesion specific risk issues are at low cardiac risk and can often deliver safely in a community hospital setting.

Neonatal complications occurred in one third of women under age 20 or over age 35 who had obstetric risk factors, smoked or received anticoagulants and had a risk score of 1 or more; whereas the rate in matched controls without heart disease was 11 percent.[172] In a study of pregnancy complicated by rheumatic heart disease, mitral stenosis, mitral regurgitation and aortic regurgitation accounted for 61%, 33% and 6% of cases, respectively.[173]

PERIPARTUM CARDIOMYOPATHY

Peripartum cardiomyopathy (PPCM) is a type of dilated cardiomyopathy of unknown origin. Although the incidence is low- less than 0.1% of pregnancies- morbidity and mortality rates are high, ranging from 5% to 32%.[174,175] The 2010 ESC Working Group defined PPCM as an idiopathic cardiomyopathy with the following characteristics:

- Development of heart failure toward the end of pregnancy or in the months following delivery

- Absence of another identifiable cause for the heart failure
- Left ventricular (LV) systolic dysfunction with an LV ejection fraction (LVEF) nearly always less than 45%. The left ventricle may or may not be dilated.[176]

Several risk factors predispose a woman to PPCM, including increased maternal age, multiple gestation and a history of preeclampsia, eclampsia or postpartum hypertension.[177-181] Prognosis of PPCM is positively related to the recovery of ventricular function.[182]

JUSTIFICATION OF THE STUDY

Clinical Profile of Patients Attending the Obstetric Medicine Clinic in a Tertiary Care Centre in South India

Maternal mortality is one of the important health indicators of the country. Non-communicable diseases in pregnancy are becoming increasingly important in contributing to death and poor health. Early diagnosis and timely intervention can help reduce the maternal and fetal mortality and morbidity. An Obstetric physician can cater to the need for specialist management of medical disorders that complicate pregnancy.

It is therefore important to describe the clinical profile and maternal and fetal outcomes of patients being referred to the Obstetric Medicine clinic which is the main purpose of my study.

METHODOLOGY

SETTING

This is an observational, cross sectional study conducted in department of General Medicine at Christian Medical College Hospital, Vellore over a period of 11 months. All pregnant patients attending the Obstetric Medicine clinic, who newly register or are referred, from September 2016 to July 2017, are enrolled. Patients below the age of 18 years are excluded. Postpartum patients and nonpregnant patients who may also be referred to this clinic were excluded. The procedures of the study were explained in detail to the participants and their close relatives. Participants were included only after obtaining written consent from the patient directly on their first visit to the clinic. Consent was obtained in the participants' native language

STUDY DESIGN

This is a descriptive study done on pregnant patients who attend the Obstetric Medicine clinic. The historical cohort consists of patients who attend the clinic from September 2016 to March 2017. The prospective cohort consists of patients who attend the clinic from April 2017 to July 2017.The clinical profile and the maternal outcomes were studied. Those patients who delivered during the study period were followed up to determine the foetal outcome via telephonic interview.

PARTICIPANTS

Inclusion criteria

All pregnant patients who attend the Obstetric Medicine clinic are enrolled at their first visit.

Exclusion criteria

1. All patients below the age of 18 years as per hospital records were excluded.
2. Postnatal patients who may also be referred to this clinic were excluded.
3. Patients who refused an informed consent were excluded.

All consecutive patients meeting the required criteria were enrolled into the study thus minimising the chances of any selection bias.

Sample size

This is a descriptive study, includes all pregnant patients from September 2016 to July 2017 who attended the Obstetric Medicine clinic. The expected sample size is 480 based on records of prior patient attendance available over a 3 month period in Obstetric Medicine clinic, at Christian Medical College, Vellore.

Quantitative variables

A. Age – <35 years and ≥ 35 years
B. Weeks of gestation at presentation- < 12 weeks, 12-28 weeks, > 28 weeks
C. Gravida, Parity, Living, Abortion/MTP
D. Height, Weight
E. BMI- underweight, normal, overweight, obese, morbid obesity
F. Pulse
G. Respiratory Rate
H. Blood pressure-systolic/diastolic
I. Gestational age at delivery: preterm which includes-extremely preterm <28 weeks, very preterm 28-32 weeks, late preterm 32-37 weeks, term >/=37 weeks, post term >/=42 weeks
J. Birth weight: low birth weight < 2.5 kg, very low birth weight < 1.5kg, extremely low birth weight < 1.0 kg

Qualitative variables

1. *Occupation of subject and spouse*: Professional/ semi-professional/ clerical, shop owner, farmer/ skilled worker/ semi-skilled worker/ unskilled worker/ unemployed

2. *Antenatal risk factors*: Gestational hypertension/ preeclampsia/ chronic hypertension/ gestational diabetes/ pregestational diabetes/ anaemia/ thyroid disorder -hypothyroidism, hyperthyroidism/ Rh negative/ liquor abnormality- oligohydramnios , polyhydramnios/ small for gestational age/ infertility/ multifetal pregnanc/ HIV positive /HBsAg positive/ polycyctic ovarian syndrome/ vitamin B 12 deficiency

3. *Past obstetric history which includes*

   -Maternal complications

   Prior gestational hypertension/ preeclampsia/ eclampsia/ GDM/ anaemia/ hypothyroidism/ hyperthyroidism/ oligohydramnios/ polyhydramnios / multiple pregnancy/ persistent trophoblastic disease/ abruption/ postpartum haemorrhage/ latent syphilis

   -Foetal complications

   SGA/ preterm delivery/ big baby/ congenital heart disease/ other congenital anomalies/ developmental delay/ neonatal death/ still born/ MTP/ vesicular mole

4. *Reasons for referral:* Evaluation of anaemia/ control of blood pressure/ control of blood sugar/ evaluation of hypothyroidism/ evaluation of hyperthyroidism/ fever/ respiratory tract symptoms/ cardiac symptoms/ connective tissue symptoms/ musculoskeletal symptoms/ urinary tract symptoms/ neurological symptom/ seizures/ gastrointestinal symptoms/ dermatological symptoms/ renal symptoms/ easy fatigability/ hematological symptoms/ review after admission/ asymptomatic currently/expert opinion

5. *Duration of symptoms*: Acute/sub acute/chronic

6. *Past medical history*: Hypertension/ diabetes/ asthma/ hypothyroidism/ hyperthyroidism/ connective tissue disease/ seizure disorder/ tuberculosis/ heart disease/ orthopaedic disorder/ rheumatic fever/ Hansen's disease/ migraine/ renal disease/ psychiatric disease/ hematological disease/ pulmonary disease/ hepatobiliary disease/ neurological disease/ skin disease/ other past medical history

7. *Past gynecological surgery*: LSCS/ myomectomy/ adnexal cyst/ diagnostic laparoscopy

8. *Past general surgery*: Appendicectomy/ thyroidectomy/ tonsillectomy/ septoplasty/ hip replacement/ ERCP and stenting/ MVR/ excision of ICSOL incision and drainage / nasal polypectomy

9. *Significant drug history*: Antihypertensive/ eltroxin/ antibiotic/ bronchodilator/ metformin/ insulin/ steroid/ DMARDS/ vitamins/ ecospirin

10. *Family history :* Hypertension/ diabetes/ hypothyroidism/ asthma/ tuberculosis/ jaundice/ seizure/ cancer/ SLE

11. *Significant general examination finding :* Pallor/ icterus/ cyanosis/ clubbing/ lymphadenopathy/ pedal edema/ Jugular venous pulse/ rash/ acanthosis nigricans/ alopecia/ throat congestion/ oral ulcer/ glossitis/ spine tenderness/ temperature/ thyroid enlargement.

12. *Diagnosis and treatment provided*

13. *Reason for hospital admission*: Obstetric, medical, both, other

14. *Outcome variables*: Type of maternal complications, type of foetal complications

FUNDING AND APPROVAL

Funding source

A FLUID Research grant (Institutional grant) was approved for the purpose of this study.

Institutional review board and ethics approval

The research proposal was discussed with the Institutional Review Board in April 2017 and approval was obtained [IRB Min .No. 10626(OBSERVE), dated 03.04.17]

There were no ethical issues related to this study. Institutional review board approval was obtained prior to the commencement of the study.

DETAILED ALGORITHM OF THE STUDY

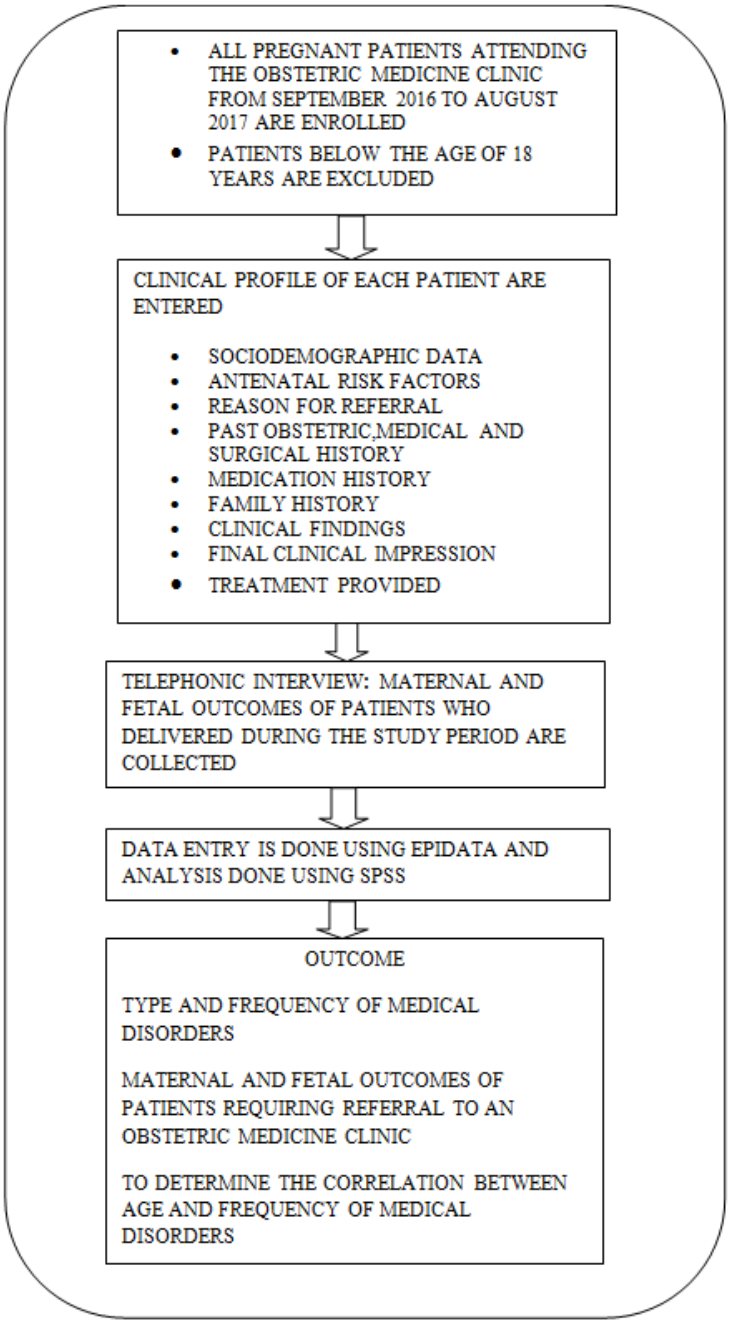


Figure 3: Algorithm of the study

DEFINITIONS

The following pathological conditions were assessed during the study and defined as per standard guidelines. (ANNEXURE I)

1. Hypertension in pregnancy
2. Asthma
3. Hypothyroidism and hyperthyroidism
4. Anaemia in pregnancy
5. Gestational diabetes mellitus
6. Overt diabetes mellitus
7. Asymptomatic bactriuria
8. Acute cystitis
9. Acute febrile illness
10. Pyelonephritis
11. Pneumonia/ lower respiratory tract infection
12. Influenza like illness
13. Influenza
14. Dengue fever
15. Dengue hemorrhagic fever (DHF)
16. Dengue shock syndrome (DSS)
17. Systemic lupus erythematosus (SLE)
18. Tuberculosis in pregnancy

PRIMARY AND SECONDARY OUTCOMES

The primary outcomes were

1. To study the common reasons for referral to the Obstetric Medicine clinic
2. Describe the frequency and type of medical disorders diagnosed in the Obstetric Medicine clinic.
3. Describe the maternal and foetal outcome of these patients.

The secondary outcomes were

1. To study the correlation of age and the common medical disorders in pregnancy.

DATA SOURCE

Demographic data, risk factors, reasons for referral, final diagnosis and treatment given will be collected for all the patients in a clinical research form. Maternal and foetal outcome will be assessed from hospital records or telephonic means (if delivery did not take place in this institution).

STATISTICAL METHOD

Demographic data will be analysed with descriptive statistics. Statistical analysis was performed using SPSS software for Windows version 16.0.

Means and standard deviations are provided for all the continuous variables and frequencies and percentages for categorical variables**.** Categorical variables will be presented as frequency tables. Correlation between two categorical variables will be tested using chi square test, and between two continuous variables will be tested using Pearson correlation coefficient. A p value of less than 0.05 was considered significant**.**

RESULTS

This study was conducted over a period of 11 months (September 2016 to July 2017). This is a prospective cross sectional study with follow up of a historical cohort of pregnant patients who attended the Obstetric Medicine outpatient department at the Christian Medical College, a tertiary care centre in south India. The historical cohort consists of patients who attended the clinic from September 2016 to March 2017. The prospective cohort consists of patients who attended the clinic from April 2017 to July 2017.

The clinical profiles of these patients were gathered using a clinical research form. The maternal and foetal outcome of patients who delivered during the study period were determined via a telephonic interview and based on hospital records at the time of delivery. The expected sample size was 480 based on prior attendance at the Obstetric Medicine outpatient clinic. Numbers of patients who attended the outpatient clinic during the study period was 445, out of which 52 were excluded and 393 patients were included in the analysis. Of the 52 patients who were excluded, 25 patients were postnatal, 19 patients did not consent for the study, 3 patients were preconceptional, 2 patients were less than 18 years, 2 patients were missed and 1 patient was proxy.

STUDY STATEMENT

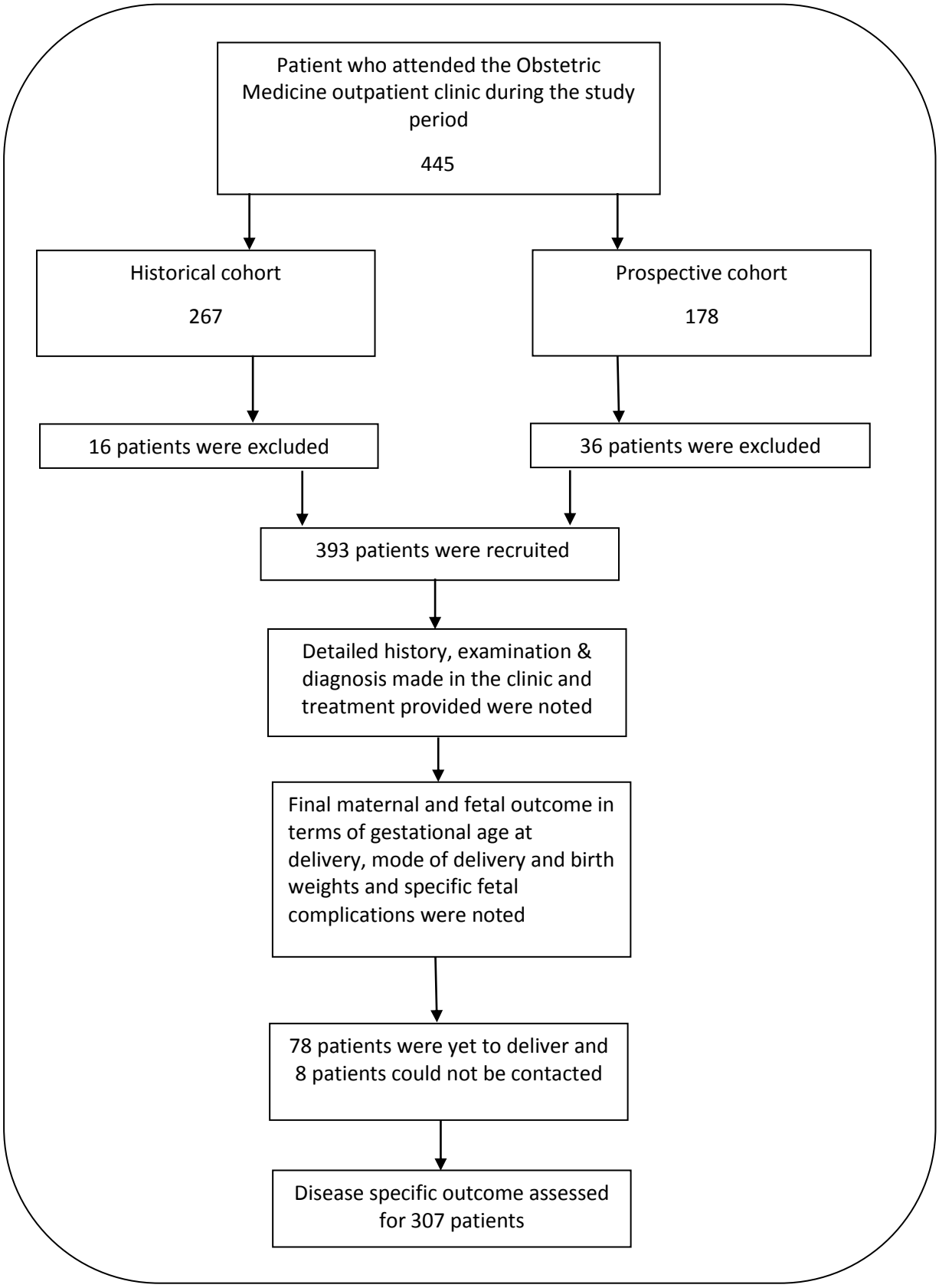


Figure 4: STROBE statement

Table 5: Baseline characteristics

SL.NO	VARIABLE	NUMBER (N=393) (%)
1.	Age	27.46 ± 4.9 years (Mean)
2.	Occupation of subject	Housewife (81.5%)
3.	Primigravida	194 (49.4%)
	Gravida 2	119 (30.3%)
	Gravida 3	53 (13.5%)
	Gravida 4	17 (4.3%)
	Gravida 5	10 (2.5%)
4.	Prior Abortion	90 (22.9%)
5.	Weeks of gestation at presentation to clinic	21.72 ± 9 weeks (Mean)
6.	No. of patients with antenatal risk factors	301 (76%)
	Thyroid disorder	112 (28.5%)
	Anaemia	109 (27.7%)
	Gestational diabetes mellitus (GDM)	89 (22.6%)
	Chronic hypertension	55 (14 %)
	Small for gestational age	53 (13.5%)
	Infertility	52 (13.2%)
	Preeclampsia	25 (6.4%)
	B12 deficiency	24 (6.1%)
	Gestational hypertension	21 (5.3%)
	Diabetes mellitus	19 (4.8%)
	Multiple pregnancy	9 (2.3%)
	HIV seropositive	1 (0.3%)
	HBsAg seropositive	3 (0.8%)
	Others	23 (5.8%)
7.	Significant past obstetric history	118 (30%)
8.	Significant family history	197 (50.1%)
	Diabetes Mellitus	131 (33.3%)
	Hypertension	111 (28.2%)
	Hypothyroidism	17 (4.3%)
9.	Significant prior drug intake	192 (48.9%)
10.	No. requiring hospital admissions	113 (28.8%)
11.	No. of deliveries during the study period	307 (78.1%)
12.	Gestational age at delivery	36.75 ± 4.6 weeks (Mean)
13.	Birth weight (N=294)	2.8 ± 0.596 kg (Mean)
14.	Mode of delivery	N=307
	Vaginal	176 (57.3%)
	LSCS	115 (37.4%)
15.	No. of foetal complications	60 (19.5%)
	No. of still births/ abortions	16 (5.2%)
16.	No. of maternal complications	37 (12.1 %)

Figure 5: Age distribution of the population

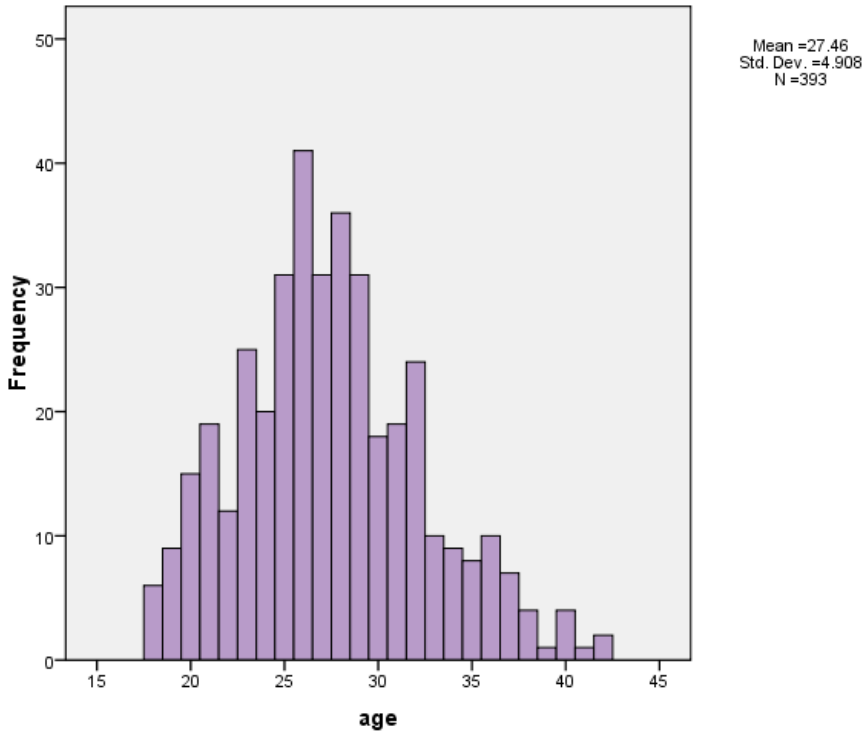
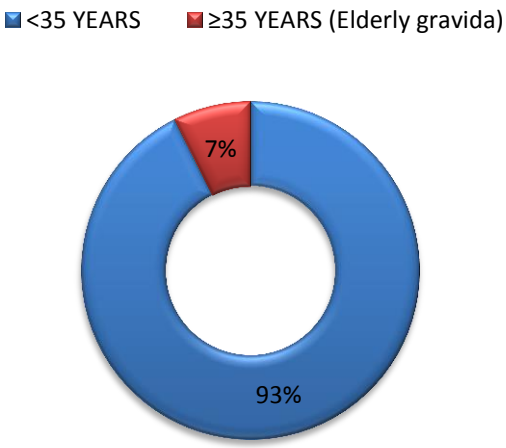


Figure 6: Age Category (N=393)



BASELINE CHARACTERISTICS

The baseline characteristics and demographic data of the study group are as follows. The average age was calculated to be 27.46 with standard deviation of 4.9 years (Figure 5).

81.5% patients were housewives. 7.4 % patients were categorised as elderly gravida (Figure 6). 49.4 % of patients were primigravida and 2.5 % of patients were grandmultipara. 22 % of patients gave a history of prior abortion. 76 % of patients had any of the multiple antenatal risk factors (Table 5).

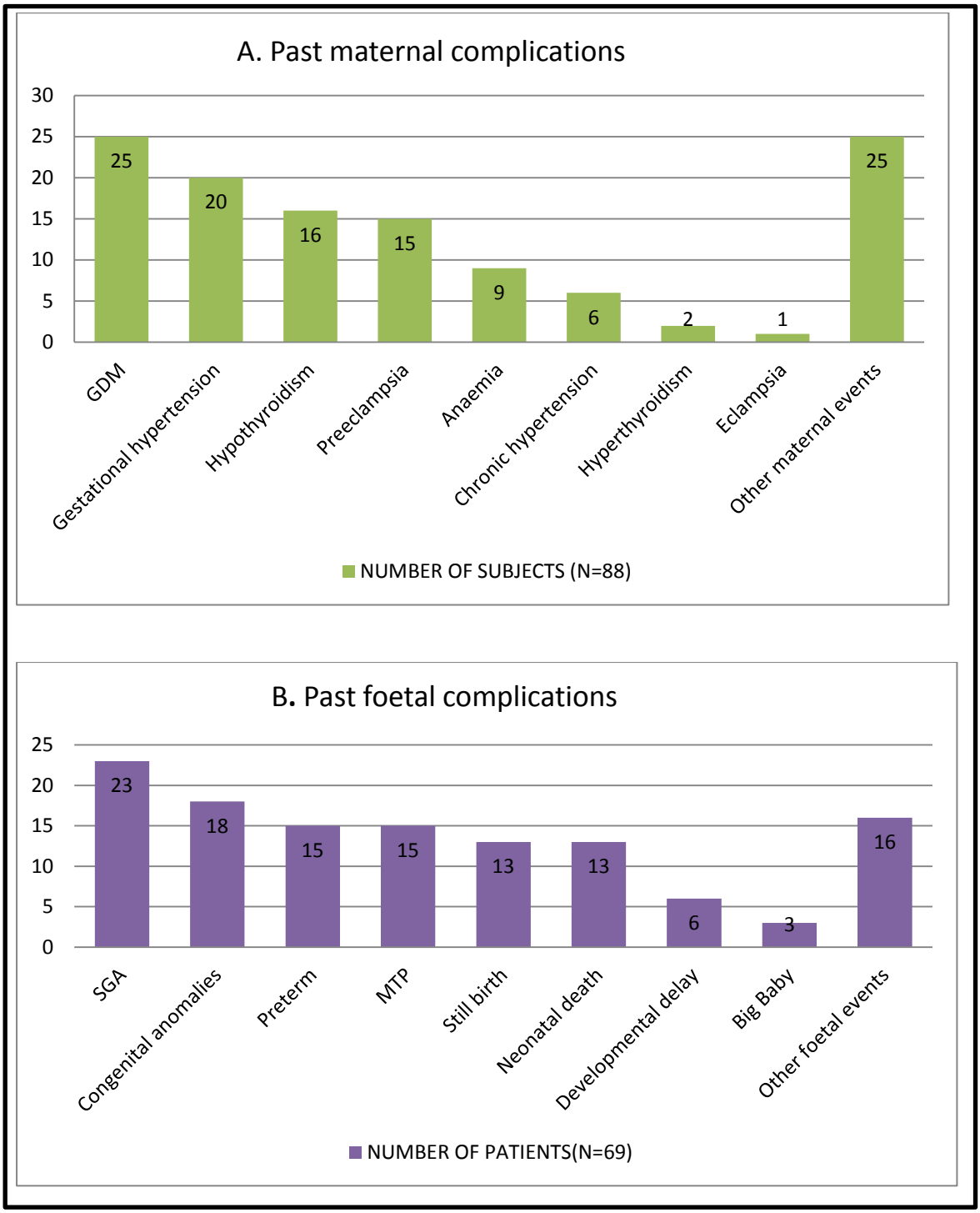
28.5 % of patients had an antenatal risk factor of thyroid disorder. Hypothyroidism was present in 106 patients. Anaemia was present in 27.7% of patients. Gestational diabetes mellitus was detected in 22.6% of patients. Chronic hypertension was present in 14 % of patients.

Thirteen percent patients gave a history of treatment for infertility. Gestational hypertension and preeclampsia was present in 5.3% and 6.4 % of patients respectively. Overt diabetes mellitus was present in 19 patients. There were 3 patients who were HBsAg seropositive and one patient who was Human immunodeficiency virus seropositive.

Twenty three patients had other antenatal risk factors namely polycystic ovarian syndrome, Rh negative blood group and liquor abnormality during the current pregnancy. Other additional risk factors were vitamin D deficiency, gestational thrombocytopenia, recurrent urinary tract infection and placenta previa.

PAST OBSTETRIC HISTORY

Figure 7: Significant past obstetric history

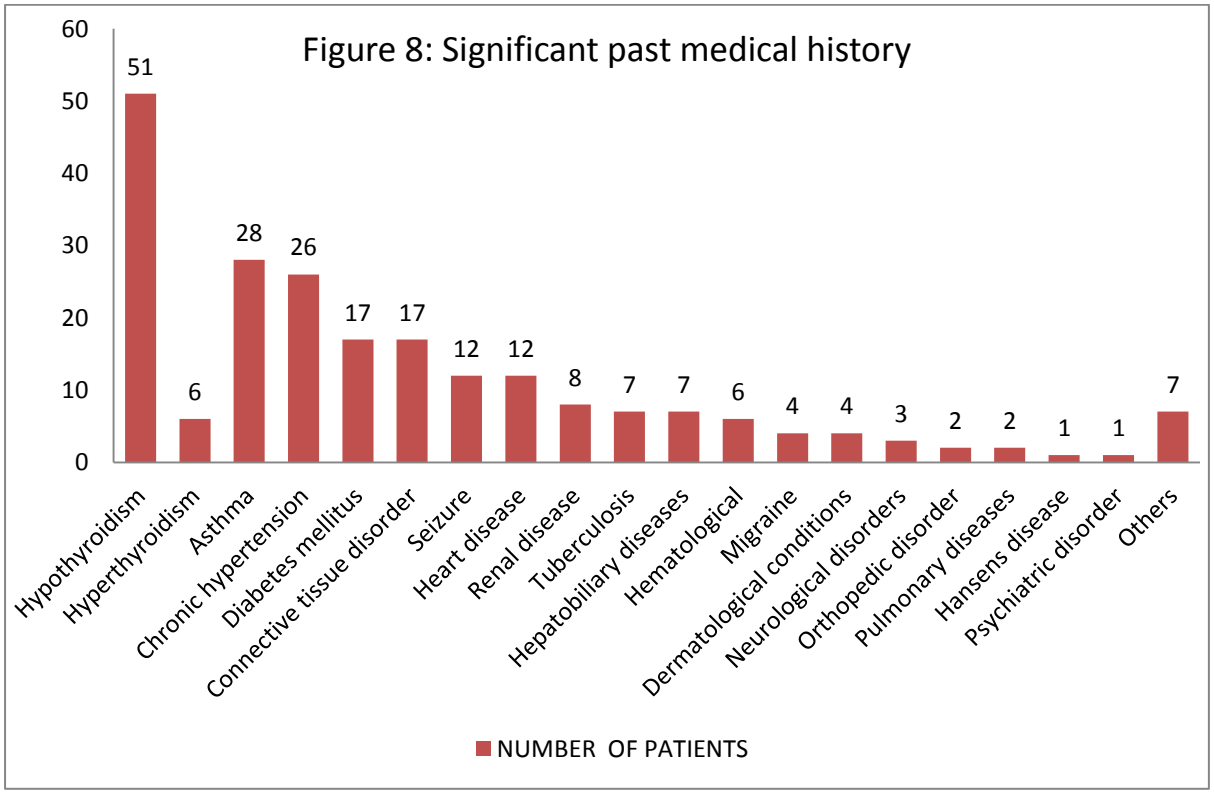


In this study population, 118 patients (30%) had a significant past obstetric history. 88 patients had significant maternal complication and 69 had past foetal complications

(Figure 7A &B).Other past maternal events include oligohydramnios, polyhydramnios, multiple pregnancy, persistent trophoblastic disease, abruption, postpartum haemorrhage and latent syphilis which were present in 25 patients. History of small for gestational age was present in 23 patients followed by congenital anomalies (18 patients), prior preterm delivery (15 patients) and prior medical termination of pregnancy (15 patients). The others were neonatal death, developmental delay and prior big baby.

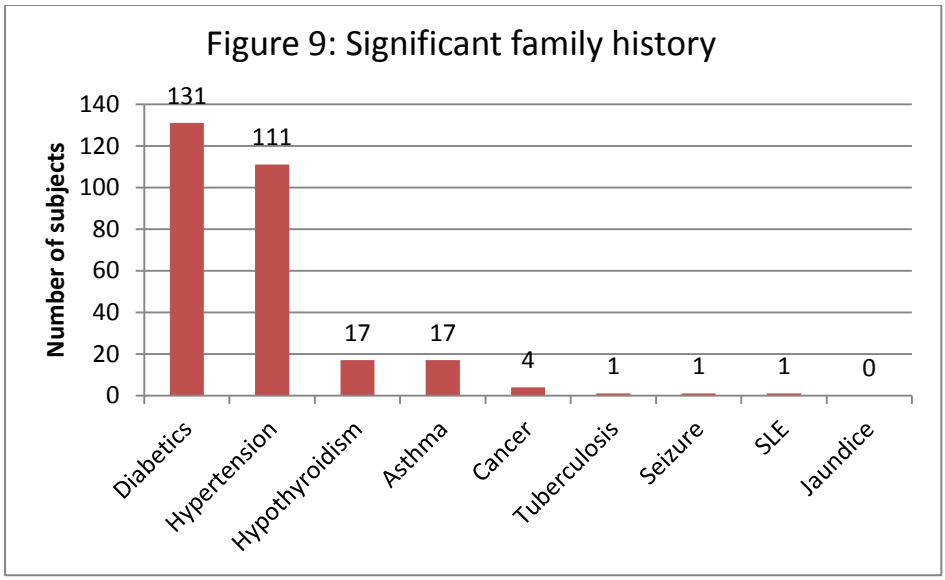
PAST MEDICAL HISTORY

The most common past medical history was hypothyroidism (51 patients) followed by asthma (28 patients), chronic hypertension (26 patients) and diabetes mellitus (17 patients). (Figure 8)



*Other co morbidities: History of deliberate self-harm (4), Latent syphilis (1), Benign Gastric Outlet Obstruction (1), Otosclerosis (1)

SIGNIFICANT FAMILY HISTORY



A significant family history was present in 50.1% of patients in the study population (197 patients). Thirty three percent had family history of diabetes mellitus and 28% had family history of hypertension. Other significant family history included hypothyroidism and asthma in the 1st degree relative. One patient had systemic lupus erythematosus in the sibling. (Figure 9)

SIGNIFICANT PRIOR DRUG INTAKE

Significant prior drug intake was present in 48.9% of patients who attended the outpatient clinic. 31 patients of those with hypertensive disease in pregnancy were on some antihypertensive before attending the Obstetric Medicine outpatient clinic. 17 patients were already on metformin and 6 patients were on insulin for control of blood sugar. 8 patients were on vitamins other than calcium and iron. 10 patients were on

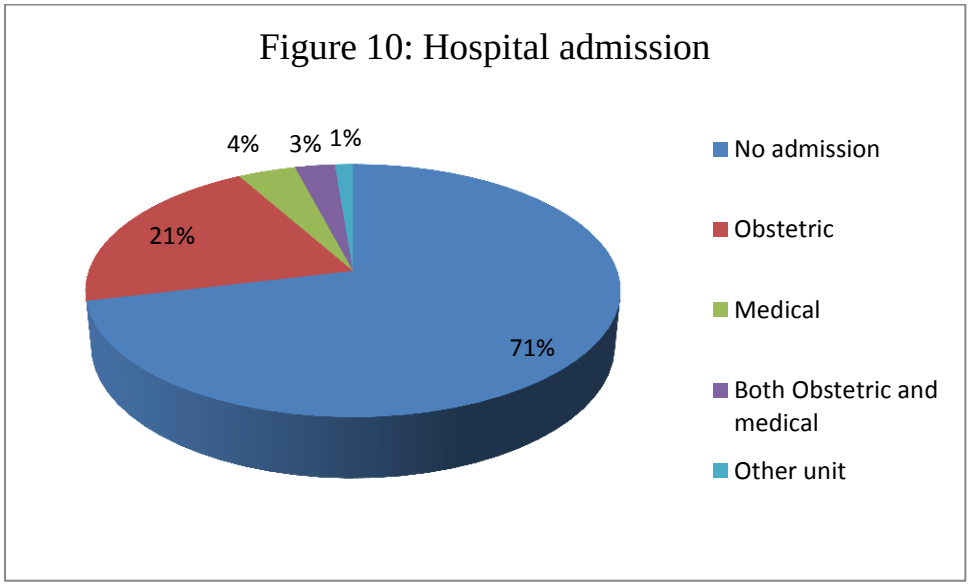
steroids, 10 were on disease modifying drugs. 45 patients were on low dose aspirin (Table 6).

17 patients received prior treatment for autoimmune disease which included corticosteroids (6 patients), hydroxychloroquine (8 patients), azathioprine (5 patients) and sulphasalazine (1 patient), low dose aspirin (8 patients), low molecular weight heparin (2 patients), human immunoglobulin (1 patient) and warfarin (1 patient).

Table 6: Prior significant drug history

Sl. No.	Drug	Number
1.	Thyroxin	86
2.	Ecosprin	45
3.	Antihypertensive	31
4.	Metformin	17
5.	Antibiotics	14
6.	Corticosteroid	10
7.	DMARD	10
8.	Vitamins	8
9.	Insulin	6

REASON FOR HOSPITAL ADMISSION



29% patients required hospital admission (113 patients). 21 % of patients were admitted to the Obstetric ward. 4% of the patients were admitted in the medical ward alone. 3% were admitted both in obstetrics and medical wards and 1% required admission under other specialities (Figure 10).

Table 7: Medical reasons for hospital admission

SL.NO.	DIAGNOSIS	VALUE
1.	Infection*	13
2.	Anaemia	5
3.	Hypertension	4
4.	Cardiovascular disease**	4
5.	Autoimmune disease #	5
6.	Vestibular neuronitis	1
7.	Restrictive lung disease	1
8.	Acute exacerbation of Bronchial asthma	1
9.	Hypothyroidism	1
10.	Uncontrolled diabetes mellitus	1
11.	Nonspecific musculoskeletal pain	1
12.	Hyperemesis gravidarum	1
13.	Acid peptic disease	1

*13 patients were admitted for the management of some type of infection (Table 7).

Of the thirteen patients the most common diagnosis was urinary tract infection (5 patients), pyelonephritis (1 patient), symptomatic neurocysticercosis (1 patient), tubercular meningitis (1 patient), acute bronchitis (1 patient), dengue with thrombocytopenia (patient 1), lower respiratory tract infection (1 patient) and viral fever (1 patient). Five patients were admitted for management of severe anaemia in pregnancy.

Four patients were admitted for the control of high blood pressure of which two patients had chronic hypertension. Two patients had preeclampsia superimposed on chronic hypertension and one patient had posterior reversible encephalopathy syndrome (PRES).

**Four patients were admitted for the management of cardiovascular disease namely pulmonary artery hypertension, paroxysmal tachycardia, coarctation of the aorta and Takayasu's arteritis.

#Autoimmune disorders requiring hospital admission were- Systemic lupus erythematosus with lupus nephritis (2 patients), undifferentiated connective tissue disease (1), Evans syndrome (1) and antiphospholipid antibody syndrome (1).

Five patients required admission under other specialities for the following reasons- pituitary adenoma with secondary diabetes mellitus for glycaemic control (endocrinology), rheumatic heart disease status post MVR with severe pulmonary artery hypertension-NYHA III (cardiology), pheochromocytoma for laparoscopic

adrenalectomy (endocrine surgery), left renal artery stenosis due to fibromuscular dysplasia for renal angiography (cardiology) and left renal artery stenosis for recanalisation with covered stent (cardiology).

Table 8: Number of hospital admissions

Number of admissions	Value
1	83
2	24
≥3	6

83 patients required only one hospital admission.

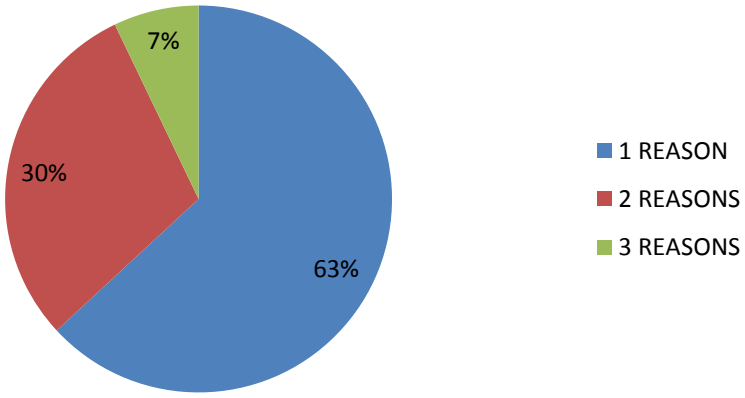
Six patients required three or more admissions during their pregnancy. They were admitted for false labour, autoimmune disease, evaluation of thrombocytopenia, control of high blood pressure and infections.(Table 8)

PRIMARY OUTCOME

1. COMMON REASONS FOR REFFERAL TO OBSTETRIC MEDICINE CLINIC

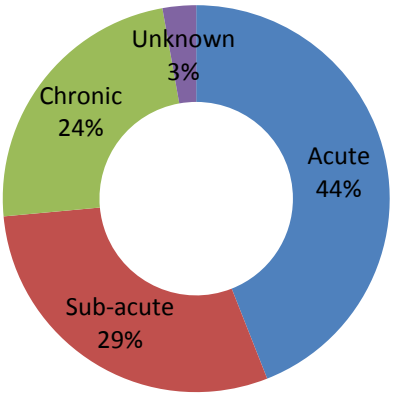
1a. NUMBER OF REASONS

Figure 11: Number of reasons



1b. DURATION OF SYMPTOMS

Figure 12: Duration of symptoms



1c. REASONS FOR REFERRAL TO THE OBSTETRIC MEDICINE CLINIC

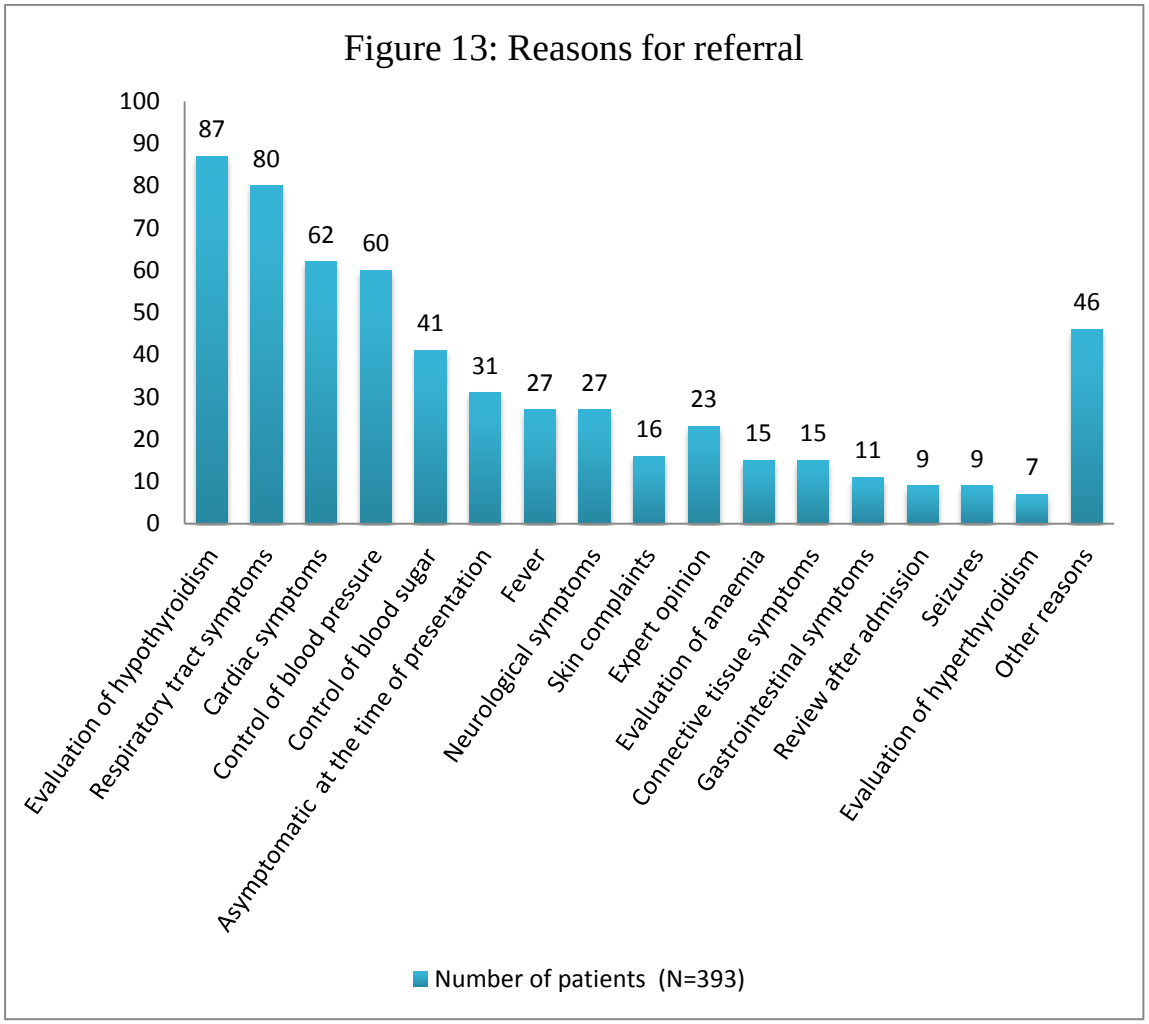


Figure 13 shows the common reasons for referral to the obstetric medicine outpatient clinic. 248 patients were referred for a single reason. 22.1% patients were referred for the evaluation and management of hypothyroidism.

20.4 % patients presented with respiratory tract symptoms such as cough, rhinorrhoea, throat pain and wheeze.

The cardiac symptom was breathlessness (38 patients) followed by palpitations (12 patients) and chest pain (8 patients). The other cardiac symptoms are pedal oedema, hyperventilation, syncope, orthopnoea and for titration of anticoagulants.

Sixty patients were referred for the management of high blood pressure. 41 patients were referred for control of blood sugar. 30 patients were diagnosed to have gestational diabetes mellitus and 11 patients were diagnosed to have pregestational diabetes mellitus. Of these patients, 2 patients required hospital admission for glycaemic control.

Twenty seven patients presented with fever. Among these patients, 20 patients also had cough as an associated symptom.

Twenty seven patients presented with neurological symptoms. Eight patients had headache, five patients had carpal tunnel syndrome, and four patients had Bell's palsy.

Sixteen patients were referred with dermatological symptoms such as generalised itching (8 patients), hair loss with photosensitivity, vesicular lesions and generalised skin rash. One patient was diagnosed to have Huriez syndrome and one patient was with systemic lupus erythematosus.

Forty six patients presented to the clinic for other reasons which included radiological evidence of splenomegaly, asymptomatic proteinuria, ANA positive, LA positive, lean body habitus, mastalgia, deep vein thrombosis, recent enteric fever, for opinion on evaluation of APLA syndrome, urinary tract symptoms, musculoskeletal symptoms, easy fatigability and prior kidney disease.

Reasons for Expert opinion: Twenty three patients were referred for expert opinion namely for clearance for MDT for Hansen's disease, irregularly irregular pulse, for cardiovascular examination, absent peripheral pulses, Takayasu's arteritis, for titration of anticoagulation and for change over from warfarin to heparin. Other reasons were optimisation of antiepileptic drugs, distal renal tubular acidosis, focal segmental glomerulosclerosis (FSGS), class IV lupus nephritis, evaluation of thrombocytopenia, HIV seropositive, HBSAG seropositive, latent syphilis, rheumatoid arthritis, old spine tuberculosis, old cortical vein thrombosis.

Out of the 393 patients, 9 patients came to clinic for review after a recent hospital admission under medicine.

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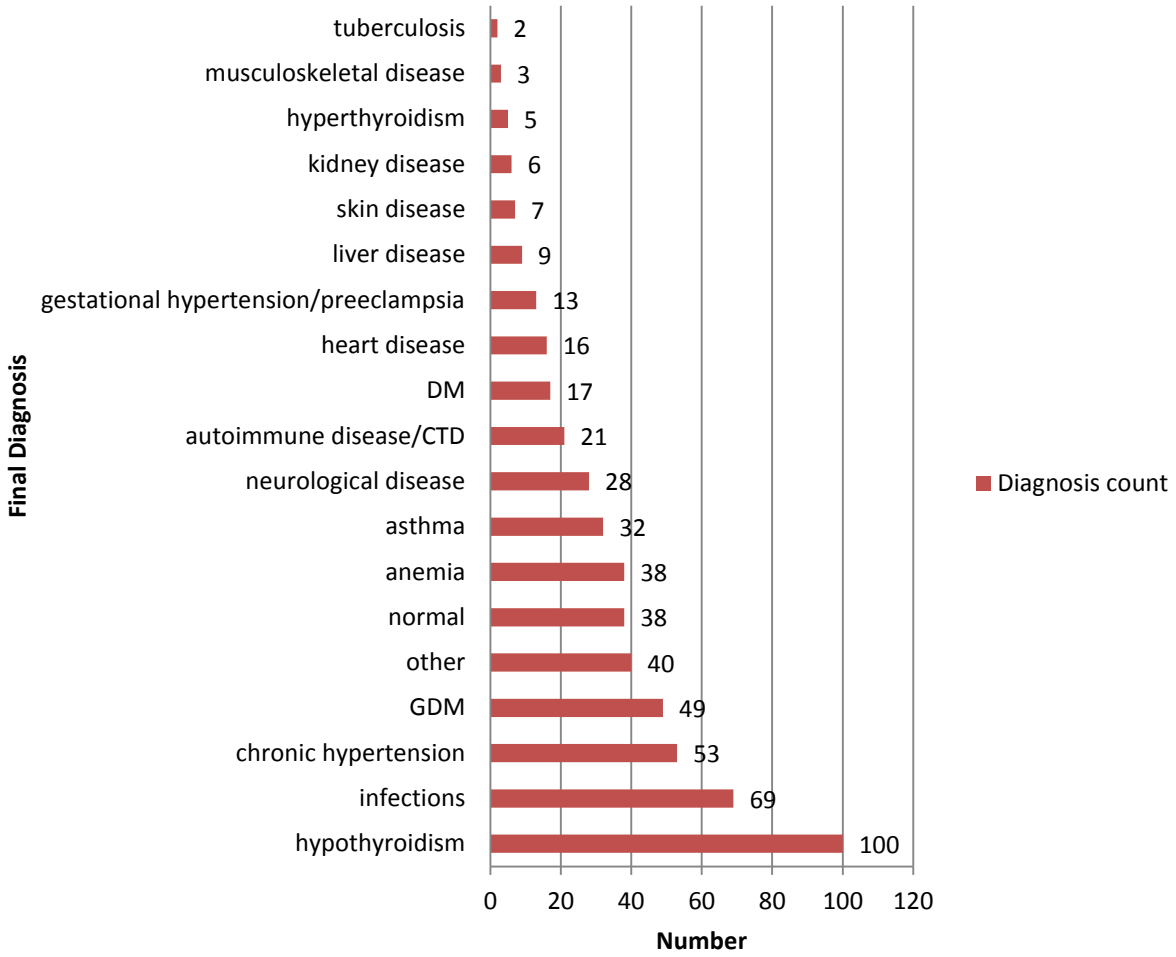
2. DIAGNOSIS AND TREATMENT

2a. FREQUENCY OF MEDICAL DISORDERS DIAGNOSED IN OMC

Figure 14: Diagnosis made in OMC

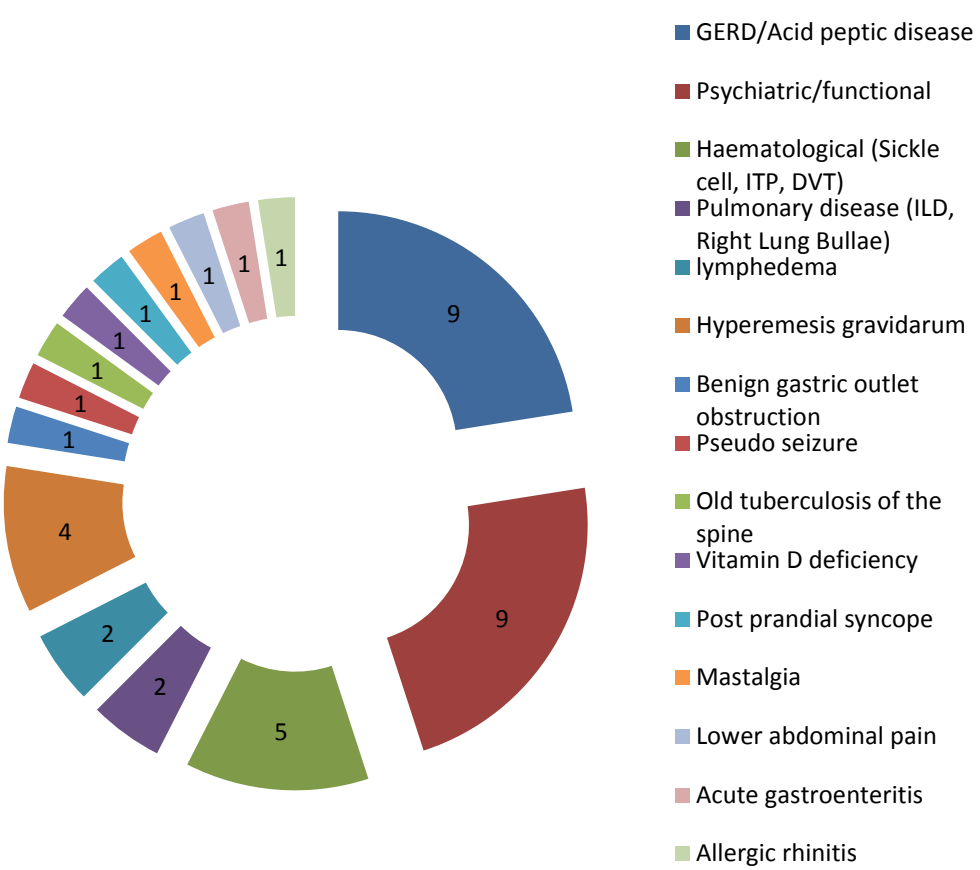


The spectrum of diagnosis made among the patients who attended the obstetric medicine clinic is described above (Figure 14). The most common diagnosis was hypothyroidism (25%) followed by some type of infection (17.5%) and chronic hypertension was the third most common problem (13.4%). Two patients were diagnosed to have tuberculosis. One patient had a tuberculoma and one patient had

tubercular meningitis. 49 patients were diagnosed to have gestational diabetes mellitus. Thirty eight patients were diagnosed as normal and hence were reassured.

2b. OTHER DIAGNOSIS MADE IN OBSTETRIC MEDICINE CLINIC

Figure 15: Other diagnosis made in OMC



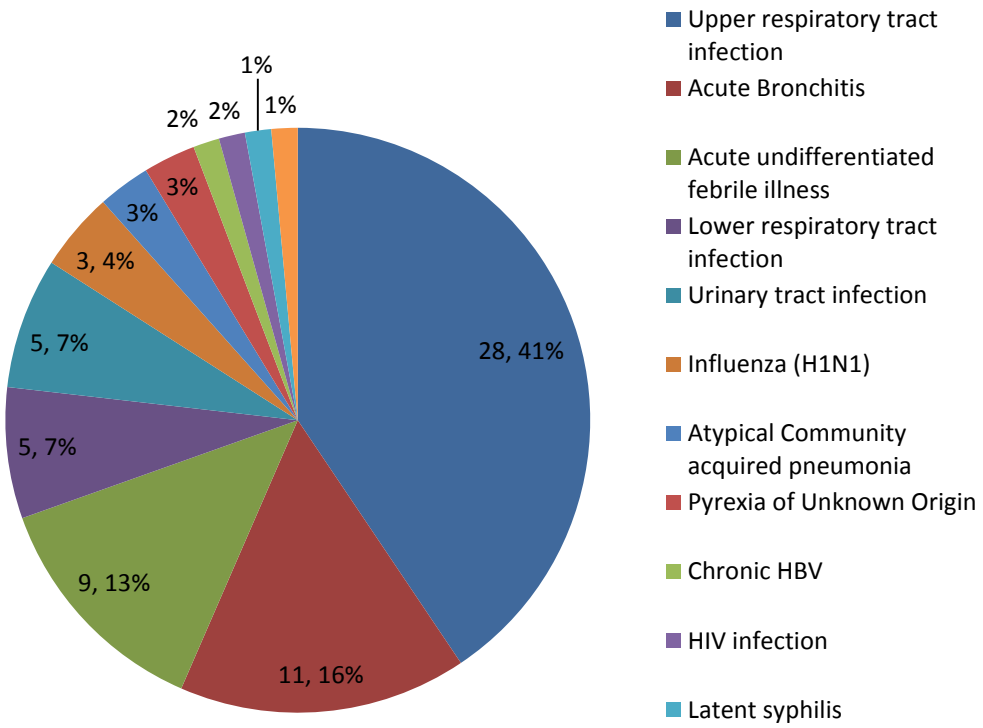
Other diagnoses were made in the obstetric medicine clinic among 40 patients (Figure 15). Nine patients had acid peptic disease/gastroesophageal reflux disease. Nine other

patients had functional disorder such as anxiety, claustrophobia, panic attack, adjustment disorder and episodic hyperventilation.

The haematological disorders identified were deep vein thrombosis (2 patients), idiopathic thrombocytopenic purpura in remission and sickle cell disease. Two patients had nonspecific lymphedema. Two patients had pulmonary disease such as ILD (1 patient) and one patient was diagnosed to have a right lung bullae.

2c. TYPE OF INFECTIONS DIAGNOSED IN OBSTETRIC MEDICINE CLINIC

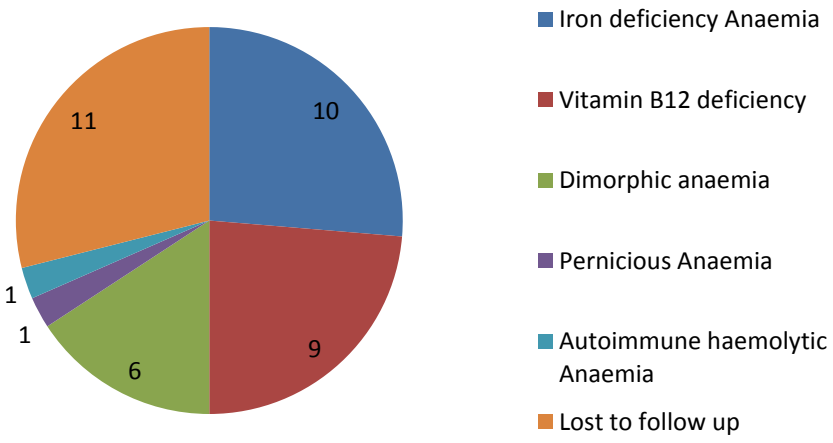
Figure 16: Type of Infections diagnosed in OMC



An upper respiratory tract infection was diagnosed in 28 patients (Figure 16). Acute bronchitis, lower respiratory tract infection, influenza and atypical community acquired pneumonia constituted a significant number of patients (21 patients). 9 patients had acute undifferentiated febrile illness and 5 patients had urinary tract infection. Two patients were evaluated for pyrexia of unknown origin. One patient was detected to have right pleural effusion.

2d. TYPE OF ANAEMIA DIAGNOSED IN OBSTETRIC MEDICINE CLINIC

Figure 17: Causes of anaemia



Overall anaemia was present in 27 % of this study population (109 patients) as an antenatal risk factor at the time of delivery (Figure 17).

38 patients were diagnosed to have anaemia in the OMC clinic. 10 patients were diagnosed to have iron deficiency anaemia and 9 patients with B 12 deficiency. 6 patients had dimorphic anaemia. However in 11 patients the type of anaemia was unknown, since they did not follow up with investigations.

2e. TREATMENT RECEIVED IN OBSTETRIC MEDICINE CLINIC

TREATMENT FOR CHRONIC HYPERTENSION

Out of the 55 patients who were diagnosed to have chronic hypertension, 16 were advised home BP monitoring, 24 patients were on single antihypertensive and 3 patients required three antihypertensives for blood pressure control (Table 9).

The most common drug used was Labetalol followed by Nifedipine, Alphamethyldopa and Hydralazine. (Table 10)

Table 9: Treatment modality for chronic hypertension

SL.NO.	TREATMENT MODALITY	VALUE
1.	Home BP monitoring	16
2.	Single antihypertensive	24
3.	Dual antihypertensive	9
4.	Three antihypertensive	3
5.	Unknown	3

Table 10: Type of antihypertensive used

SL.NO.	ANTIHYPERTENSIVE	VALUE
1.	Labetalol	31
2.	Nifedipine	11
3.	Alphamethyldopa	6
4.	Hydralazine	3

TREATMENT FOR GESTATIONAL DIABETES MELLITUS

89 patients were noted to have gestational diabetes. 44 patients were receiving treatment for this elsewhere and treatment modality was not known. 29 patients were

prescribed metformin and 14 patients were advised medical nutrition therapy alone. Two patients were advised metformin and insulin (Table 11).

Table 11: Treatment for gestational diabetes mellitus

SL.NO.	TREATMENT MODALITY	VALUE
1.	Unknown	44
2.	Metformin	29
3.	MNT	14
4.	Metformin and Insulin	2

TREATMENT FOR PREGESTATIONAL DIABETES MELLITUS

19 patients were diagnosed to have pregestational diabetes mellitus. Out of which 10 patients were advised metformin and insulin. One patient required Metformin, Insulin and Voglibose for glycaemic control (Table 12).

Table 12: Treatment for pregestational diabetes mellitus

SL.NO.	TREATMENT MODALITY	VALUE
1.	Metformin and Insulin	10
2.	Metformin	3
3.	Unknown	2
4.	MNT	1
5.	Insulin	1
6.	Acarbose	1
7.	Metformin, insulin and Voglibose	1

USE OF LOW DOSE ASPIRIN IN PATIENTS AT RISK FOR DEVELOPING PREECLAMPSIA

According to the SOGC guidelines 2014, patients at risk for preeclampsia who need to be initiated on low dose aspirin are those who have previous preeclampsia, chronic

hypertension, pregestational diabetes mellitus, antiphospholipid antibody syndrome, renal disease and multiple pregnancies. In our study there were 100 patients with any of the above risk factors. Only 54 patients were on low dose aspirin.

PATIENTS WITH RECURRENT HYPERTENSIVE DISORDER

In our population, 38 patients had hypertension detected in their previous pregnancy. Out of which 50% were diagnosed with chronic hypertension in the present pregnancy

3. FOETAL AND MATERNAL OUTCOME

3a. OVERALL MATERNAL AND FETAL OUTCOME

Out of the 393 patients, 78 patients were yet to deliver at the end of the study period. Outcome data could be gathered for only 307 patients. Eight patients could not be contacted and were lost to follow up. The mean gestational age at delivery for the 307 patients was 36.75 ± 4.6 weeks. The most common mode of delivery was vaginal (133 patients), followed by lower segment caesarean section (115 patients) and instrumental deliveries (43 patients).

Maternal complications were present in 37 patients. The single most common maternal complication was postpartum haemorrhage which was present in 9 patients. This was followed by urinary tract infections (8 patients) and postpartum fever in 6 patients. There were no maternal deaths. The mean birth weight was calculated on 294 patients which was 2.8 ± 0.596 kg. Birth weight data was not available for 13

deliveries since these were 1st or 2nd trimester abortions. There were 16 still births or abortions among the 307 patients.

Table 13: Gestational age at delivery

SL.NO.	GESTATIONAL AGE	VALUE(N=291)
1.	Term (>37 WEEKS)	233 (80%)
2.	Late Preterm (32-37 WEEKS)	54 (18.5%)
4.	Very Preterm (28-32 WEEKS)	3 (1.0%)
3.	Extremely Preterm (<28 WEEKS)	1 (0.3%)

Table 13 shows the gestational age at delivery of the study population. There were 291 patients who had live births. 80% patients delivered at term and the rest were preterm.

13 Patients who were noted to have abortions delivered before 28 weeks of gestation.

Table 14: Birth weight categories

SL.NO.	BIRTH WEIGHT	VALUE(N=294)
1.	>2.5 Kg	221 (75.2%)
2.	Low birth weight (1.5-2.5 Kg)	65 (22.1%)
3.	Very Low Birth weight (1.0-1.5 Kg)	4 (1.4%)
4.	Extremely Low birth weight (<1 Kg)	4 (1.4%)

75.2% of patients delivered babies of normal birth weight. 4 patients had extremely low birth weight babies (Table 14).

Table 15: Type of foetal complication

SL.NO.	FOETAL COMPLICATION	NUMBER
1.	Nursery Admission	34
2.	Still birth/Abortion	16
3.	Neonatal Jaundice	7
4.	Neonatal death	1
5.	Right pneumothorax	1
6.	Right ectopic testes	1

60 patients reported having some form of foetal complication. 34 babies required nursery admission as judged by the treating doctor. There were 16 abortions/ still births. 7 patients developed neonatal jaundice. There was one neonatal death on day 11 (Table 15).

3b. BAD FOETAL OUTCOME

The following tables give the clinical profile of the patients who had abortions or still births.

The mean age of the patient was 26.19 years with standard deviation of 3.67 years. Nine patients were primigravida. Four patients had prior abortions.

Table 16: Antenatal risk factors

SL NO.	ANTENATAL RISK FACTOR	VALUE
1.	Chronic hypertension	5
2.	Preeclampsia	2
3.	Hypothyroidism	4
4.	GDM	1
5.	Anaemia	1
6.	Infertility	1

Five patients who subsequently developed abortions had chronic hypertension. Four patients had an antenatal risk factor of hypothyroidism. 2 patients developed preeclampsia (Table 16).

Table 17: Reasons for referral of patients with bad foetal outcome

SL NO.	REASON FOR REFERRAL	VALUE
1.	Control of blood pressure	4
2.	Hypothyroidism	3
3.	Hyperthyroidism	1
4.	Fever	2
5.	Respiratory tract symptoms	3
6.	Cardiac symptoms	1
7.	Musculoskeletal symptoms	1
8.	Urinary tract symptoms	1
9.	Thrombocytopenia	1
10.	Expert opinion	1
11.	Others*	3

***Other reasons**- Absent pulse, HBsAg positive, Radiological evidence of splenomegaly

Table 18: Diagnosis of patients with bad foetal outcome

SL NO.	DIAGNOSIS	VALUE
1.	Chronic hypertension	6
2.	Hypothyroidism	4
3.	Infection*	5
4.	Autoimmune diseases	3
5.	GDM	1
6.	Coarctation of aorta	1
7.	Adult onset Nephrotic syndrome	1
8.	Others**	2

*Infections: Upper respiratory infection (2), Post viral bronchitis (1), chronic hepatitis B infection (1), Urinary tract infection (1)

**Others: Pyrexia of unknown origin, Bicytopenia -? Evans syndrome

Table 19: Gestational age at delivery of still births/abortions

SL.NO.	GESTATIONAL AGE	VALUE
1.	<28 WEEKS	13
2.	32-37 WEEKS	2
3.	28-32 WEEKS	1

3c. REASON FOR MEDICAL TERMINATION OF PREGNANCY

Out of 16 foetal deaths, 7 were medical termination of pregnancy for the following reasons.

1. SLE Class IV Lupus nephritis with autoimmune haemolytic anaemia and posterior reversible encephalopathy syndrome (15 weeks)
2. Chronic hypertension with severe preeclampsia, HELLP syndrome (26 weeks)
3. Coarctation of the aorta (11 weeks)
4. Takayasu's arteritis (13 weeks)
5. Adult onset Nephrotic syndrome (18 weeks)
6. Prelabour premature rupture of membranes (19 weeks)
7. Holoprosencephaly (20 weeks)

SECONDARY OUTCOMES

1. CORRELATION OF AGE, GRAVIDA AND FAMILY HISTORY WITH MEDICAL DISEASES IN PREGNANCY

1a. Correlation of age, gravida and family history with chronic hypertension

There is no statistically significant correlation between age (≥ 35 years) or gravida (primigravida) and presence or absence of chronic hypertension.

25.2% of patients with a family history of hypertension (1st degree relative) were found to have chronic hypertension (p <0.001) (Table 20).

Table 20: Correlation of age, gravida and family history with chronic hypertension

Sl.no	Risk Factor	Category	Chronic hypertension Present (%)	Chronic hypertension Absent (%)	p-value
1.	Age (years)	≥35	5 (17.2)	24 (82.8)	0.580
		<35	50 (13.7)	314 (86.3)	
2.	Gravida	Primi	21 (10.8)	173 (89.2)	0.074
		Multi	34 (17.1)	165 (82.9)	
3.	Family history of hypertension	Yes	28 (25.2)	83 (74.8)	<0.001*
		No	27 (9.6)	255 (90.4)	

1b. Correlation of age, gravida and family history with preeclampsia and gestational hypertension

12.6% of patients with family history of hypertension developed preeclampsia (p-0.003) (Table 21).

There is no statistically significant correlation between age (≥ 35 years) and gravida (primigravida/multigravida) and presence or absence of preeclampsia and gestational hypertension (Table 21, 22).

Table 21: Correlation of age, gravida and family history with preeclampsia

Sl.no.	Risk Factor	Category	Preeclampsia Present (%)	Preeclampsia Absent (%)	p-value
1.	Age (years)	≥35	2 (6.9)	27 (93.1)	0.706
		<35	23 (6.3)	341 (93.7)	
2.	Gravida	Primi	14 (7.2)	180 (92.8)	0.540
		Multi	11 (5.5)	180 (94.5)	
3.	Family history of hypertension	Yes	14 (12.6)	97 (87.4)	0.003*
		No	11 (3.9)	271 (96.1)	

Table 22: Correlation of age, gravida and family history with gestational hypertension

Sl.no.	Risk Factor	Category	Gestational hypertension Present (%)	Gestational hypertension Absent (%)	p-value
1.	Age (years)	≥35	1 (3.4)	28 (96.6)	>0.999
		<35	20 (5.5)	344 (94.5)	
2.	Gravida	Primi	12 (6.2)	182 (93.8)	0.464
		Multi	9 (4.5)	190 (95.5)	
3.	Family history of hypertension	Yes	8 (7.2)	103 (92.8)	0.323
		No	13 (4.6)	269 (95.4)	

There is no correlation of family history of hypertension with gestational hypertension (p- 0.323) (Table 22).

1c. Correlation of age, gravida and family history with gestational and pregestational diabetes

30.5% of patients with family history of diabetes mellitus were noted to have gestational diabetes mellitus (p- 0.01) (Table 23).

There is no statistically significant correlation between age (≥ 35 years) or gravida (primigravida/multigravida) and presence or absence of gestational diabetes mellitus (GDM).

Table 23: Correlation of age, gravida and family history with gestational diabetes mellitus

Sl.no.	Risk Factor	Category	Gestational diabetes Present (%)	Gestational diabetes Absent (%)	p-value
1.	Age (years)	≥35	10 (34.5)	19 (65.5)	0.114
		<35	79 (21.7)	285 (78.3)	
2.	Gravida	Primi	38 (19.6)	156 (80.4)	0.153
		Multi	51 (25.6)	148 (74.4)	
3.	Family history of Diabetes mellitus	Yes	40 (30.5)	91 (69.5)	0.01*
		No	49 (18.7)	213 (81.3)	

There is statistically significant correlation between family history of diabetes mellitus and pregestational diabetes (p <0.001) (Table 23, 24).

Table 24: Correlation of age, gravida and family history with pregestational diabetes mellitus

Sl.no.	Risk factor	Category	Pre-gestational diabetes Present (%)	Pre-gestational diabetes Absent (%)	p-value
1.	Age (years)	≥35 <35	2 (6.9) 17 (4.7)	27 (93.1) 347 (95.3)	0.642
2.	Gravida	Primi Multi	10 (5.2) 9 (4.5)	184 (94.8) 190 (95.5)	0.770
3.	Family history of Diabetes mellitus	Yes No	15 (11.5) 4 (1.5)	116 (88.5) 258 (98.5)	<0.001*

2. CORELATION OF AGE AND GRAVIDA WITH OTHER MEDICAL DISEASES IN PREGNANCY

There was no statistically significant correlation of age (≥35 years) and gravida (primigravida) with anaemia, hypothyroidism, B12 deficiency, asthma, autoimmune disease or infections. (Tables 25, 26, 27, 28, 29, 30)

Table 25: Correlation of age and gravida with anaemia

Sl.no.	Risk factor	Category	Anaemia Present (%)	Anaemia Absent (%)	p-value
1.	Age (years)	≥35 <35	8 (27.6) 101 (27.7)	21 (72.4) 263 (72.3)	0.985
2.	Gravida	Primi Multi	50 (25.8) 59 (29.6)	144 (74.2) 140 (70.4)	0.391

Table 26: Correlation of age and gravida with hypothyroidism

Sl.no.	Risk factor	Category	Hypothyroidism Present (%)	Hypothyroidism Absent (%)	p-value
1.	Age (years)	≥35	10 (34.5)	19 (65.5)	0.373
		<35	96 (26.8)	262 (73.2)	
2.	Gravida	Primi	46 (24.1)	145 (75.9)	0.150
		Multi	60 (30.6)	136 (69.4)	

Table 27: Correlation of age and gravida with vitamin B12 deficiency

Sl.no.	Risk factor	Category	B12 deficiency Present (%)	B12 deficiency Absent (%)	p-value
1.	Age (years)	≥35	1 (3.4)	28 (96.6)	>0.999
		<35	23 (6.3)	341 (93.7)	
2.	Gravida	Primi	11 (5.7)	183 (94.3)	0.721
		Multi	13 (6.5)	186 (93.5)	

Table 28: Correlation of age and gravida with asthma

Sl.no.	Risk factor	Category	Asthma Present (%)	Asthma Absent (%)	p-value
1.	Age (years)	≥35	3 (10.3)	26 (89.7)	>0.999
		<35	38 (10.4)	326 (89.6)	
2.	Gravida	Primi	19 (9.8)	175 (90.2)	0.683
		Multi	22 (11.1)	177 (88.9)	

Table 29: Correlation of age and gravida with autoimmune disease

Sl.no.	Risk factor	Category	Autoimmune diseases Present (%)	Autoimmune diseases Absent (%)	p-value
1.	Age (years)	≥35 <35	2 (6.9) 21 (5.8)	27 (93.1) 343 (94.2)	0.683
2.	Gravida	Primi Multi	9 (4.5) 14 (7)	185 (95.4) 185 (93)	0.312

Table 30: Correlation of age and gravida with infections during pregnancy

Sl.no.	Risk factor	Category	Infections Present (%)	Infections Absent (%)	p-value
1.	Age (years)	≥35 <35	4 (13.8) 57 (15.7)	25 (86.2) 307 (84.3)	>0.999
2.	Gravida	Primi Multi	31 (16) 30 (15.1)	163 (84) 169 (84.9)	0.805

Table 31: Correlation of age and gravida with infertility

Sl.no.	Risk factor	Category	Infertility Present (%)	Infertility Absent (%)	p-value
1.	Age (years)	≥35 <35	12 (41.4) 40 (11)	17 (58.6) 324 (89)	<0.001*
2.	Gravida	Primi Multi	32 (16.5) 20 (10.1)	162 (83.5) 179 (89.9)	0.059

41.4% of patients over the age of 35 years had history of treatment for infertility (p <0.001) (Table 31)

3. CORRELATION OF MEDICAL DISEASES WITH MATERNAL AND FOETAL OUTCOME

3a. Correlation of medical diseases with gestational age at delivery

58.3 % of patients with preeclampsia delivered preterm (<37 weeks of gestation) (p <0.001)

54.8% of patients with chronic hypertension delivered preterm (p <0.001)

66.7% of patients with autoimmune disease delivered preterm. (p <0.001)

There was no statistically significant correlation between the other medical diseases and gestational age at delivery. (Table 32a,32b)

Table 32a: Correlation of medical diseases with gestational age at delivery

Sl.no.	Risk factor	Category	Preterm (%)	Term (%)	p-value
1.	Gestational hypertension	Yes	3 (16.7)	15 (83.3)	0.578
		No	71 (24.6)	218 (75.4)	
2.	Preeclampsia	Yes	14 (58.3)	10 (41.7)	<0.001*
		No	60 (21.2)	223 (78.8)	
3.	Chronic hypertension	Yes	23 (54.8)	19 (45.2)	<0.001*
		No	51 (19.2)	214 (80.8)	
4.	Gestational diabetes	Yes	17 (22.7)	58 (77.3)	0.738
		No	57 (24.6)	175 (75.4)	
5.	Diabetes mellitus	Yes	2 (16.7)	10 (83.3)	0.737
		No	72 (24.4)	223 (75.6)	

Table 32b: Correlation of medical diseases with gestational age at delivery

Sl.no.	Risk factor	Category	Preterm (%)	Term (%)	p-value
6.	Anaemia	Yes	21 (21.2)	78 (78.8)	0.414
		No	53 (25.5)	155 (74.5)	
7.	Hypothyroidism	Yes	17 (22.1)	60 (77.9)	0.632
		No	56 (24.8)	170 (75.2)	
8.	Infections	Yes	11 (20)	44 (80)	0.490
		No	63 (25)	189 (75)	
9.	Asthma	Yes	3 (8.8)	31 (91.2)	0.027
		No	71 (26)	202 (74)	
10.	Vitamin B12 deficiency	Yes	3 (15.8)	16 (84.2)	0.580
		No	71 (24.7)	217 (75.3)	
11.	Autoimmune disease	Yes	12 (66.7)	6 (33.3)	<0.001*
		No	62 (21.5)	227 (78.5)	
12.	Infertility	Yes	13 (37.1)	22 (62.9)	0.055
		No	61 (22.4)	211 (77.6)	

3b. Correlation of medical diseases with foetal complication

41.7% of patients with preeclampsia developed foetal complications (p- 0.012). There is a statistically significant correlation of chronic hypertension with presence of foetal complications (p <0.001) (Table 33).

55.6% of patients with autoimmune disease developed foetal complications (p <0.001).

Table 33: Correlation of medical diseases with foetal complication

Sl.no.	Risk factor	Category	Foetal complication present (%)	Foetal complication absent (%)	p-value
1.	Gestational hypertension	Yes	4 (22.2)	14 (77.8)	0.761
		No	56 (19.4)	233 (80.6)	
2.	Preeclampsia	Yes	10 (41.7)	14 (58.3)	0.012*
		No	50 (17.7)	233 (82.3)	
3.	Chronic hypertension	Yes	17 (40.5)	25 (59.5)	<0.001*
		No	43 (16.2)	222 (83.8)	
4.	Gestational diabetes	Yes	13 (17.3)	62 (82.7)	0.620
		No	47 (20.3)	185 (79.7)	
5.	Diabetes mellitus	Yes	2 (16.7)	10 (83.3)	>0.999
		No	58 (19.7)	237 (80.3)	
6.	Anaemia	Yes	15 (15.2)	84 (84.8)	0.219
		No	45 (21.6)	163 (78.4)	
7.	Hypothyroidism	Yes	14 (18.2)	63 (81.8)	0.741
		No	45 (19.9)	181 (80.1)	
8.	Infections	Yes	13 (23.6)	42 (76.4)	0.453
		No	47 (18.7)	205 (81.3)	
9.	Asthma	Yes	2 (5.9)	32 (94.1)	0.033
		No	58 (21.2)	215 (78.8)	
10.	Vitamin B12 deficiency	Yes	2 (10.5)	17 (89.5)	0.387
		No	58 (20.1)	230 (79.9)	
11.	Autoimmune disease	Yes	10 (55.6)	8 (44.4)	<0.001*
		No	50 (17.3)	239 (82.7)	
12.	Infertility	Yes	11 (31.4)	24 (68.6)	0.060
		No	49 (18.0)	223 (82.0)	

3c. Correlation of medical diseases with birth weight

There is a statistically significant correlation of chronic hypertension (p <0.001) and preeclampsia (p- 0.002) with low birth weight. (Table 34a)

Table 34a: Correlation of medical diseases with birth weight

Sl.no.	Risk factor	Category	LBW (<2.5 kg) (%)	Normal (≥ 2.5 kg) (%)	p-value
1.	Gestational hypertension	Yes	2 (11.1)	16 (88.9)	0.259
		No	71 (25.7)	205 (74.3)	
2.	Preeclampsia	Yes	12 (52.2)	11 (47.8)	0.002*
		No	61 (22.5)	210 (77.5)	
3.	Chronic hypertension	Yes	21 (53.8)	18 (46.2)	<0.001*
		No	52 (20.4)	203 (79.6)	
4.	Gestational diabetes	Yes	15 (20)	60 (80)	0.262
		No	58 (26.5)	161 (73.5)	
5.	Diabetes mellitus	Yes	5 (41.7)	7 (58.3)	0.180
		No	68 (24.1)	214 (75.9)	
6.	Anaemia	Yes	25 (25.5)	73 (74.5)	0.849
		No	48 (24.5)	148 (75.5)	

There was a statistically significant correlation of autoimmune disease with low birth weight (p- 0.001) (Table 34b). However number of patients with autoimmune disease who delivered during the study period were low (15 patients)

Table 34b: Correlation of medical diseases with birth weight

Sl.no.	Risk factor	Category	LBW (<2.5 kg) (%)	Normal (≥ 2.5 kg) (%)	p-value
7.	Hypothyroidism	Yes	18 (24.3)	56 (75.7)	0.846
		No	55 (25.5)	161 (74.5)	
8.	Infections	Yes	8 (15.7)	43 (84.3)	0.110
		No	65 (26.7)	178 (73.3)	
9.	Asthma	Yes	5 (14.7)	29 (85.3)	0.146
		No	68 (26.2)	192 (73.8)	
10.	Vitamin B12 deficiency	Yes	7 (36.8)	12 (63.2)	0.269
		No	66 (24)	209 (76)	
11.	Autoimmune disease	Yes	10 (66.7)	5 (33.3)	0.001*
		No	63 (22.6)	216 (77.4)	
12.	Infertility	Yes	13 (38.2)	21 (61.8)	0.054
		No	60 (23.1)	200 (76.9)	

3d. Correlation of medical diseases with mode of delivery

63.6% of patients with a risk factor of preeclampsia underwent lower segment caesarean section (LSCS) (p- 0.015) (Table 35) .

9 out of 12 patients with diabetes mellitus underwent LSCS. (p- 0.014)

Table 35: Correlation of medical diseases with mode of delivery

Sl.no.	Risk factor	Category	LSCS (%)	Vaginal (%)	p-value
1.	Gestational hypertension	Yes	10 (55.6)	8 (44.4)	0.144
		No	105 (38.2)	170 (61.8)	
2.	Preeclampsia	Yes	14 (63.6)	8 (36.4)	0.015*
		No	101 (37.3)	170 (62.7)	
3.	Chronic hypertension	Yes	19 (50)	19 (50)	0.146
		No	96 (37.6)	159 (62.4)	
4.	Gestational diabetes	Yes	27 (36.5)	47 (63.5)	0.573
		No	88 (40.2)	131 (59.8)	
5.	Diabetes mellitus	Yes	9 (75)	3 (25)	0.014*
		No	106 (37.7)	175 (62.3)	
6.	Anaemia	Yes	43 (43.9)	55 (56.1)	0.250
		No	72 (36.9)	123 (63.1)	
7.	Hypothyroidism	Yes	31 (41.9)	43 (58.1)	0.583
		No	82 (38.1)	133 (61.9)	
8.	Infections	Yes	21 (42)	29 (58)	0.662
		No	94 (38.7)	149 (61.3)	
9.	Asthma	Yes	10 (29.4)	24 (70.6)	0.212
		No	105 (40.5)	154 (59.5)	
10.	Vitamin B12 deficiency	Yes	6 (31.6)	13 (68.4)	0.479
		No	109 (39.8)	165 (60.2)	
11.	Autoimmune disease	Yes	7 (46.7)	8 (53.3)	0.546
		No	108 (38.8)	170 (61.2)	
12.	Infertility	Yes	18 (52.9)	16 (47.1)	0.082
		No	97 (37.5)	162 (62.5)	

DISCUSSION

BASELINE CHARACTERISTICS

The baseline characteristics and demographic data of this study group show that the average age was calculated to be 27.46 ± 4.9 years. 7.4 % patients were categorised as elderly gravida (age ≥35 years). In a study conducted by Pawde AA et al, women aged 35 years and above constituted 9.63% of the total study population.[183] However in a study by Kunjam S et al, only 2.8% of the study population (n=500) were over the age of 36 years.[184] The average age of the study population conducted by Rajput R et al. to study the prevalence of thyroid dysfunction was 23.79 +/- 3.47 years.[185] Hence our study population was older. In the National Vital Statistics Reports of 2008 in the United States, Women aged 25 to 29 years had the highest pregnancy rate, at 167.9 per 1,000 in 2008, closely followed by women aged 20 to 24 years, 163.0 per 1000. [186]

ANTENATAL RISK FACTORS

28.5 % of patients had an antenatal risk factor of thyroid disorder which included both hypothyroidism and hyperthyroidism (hypothyroidism was present in 106 patients). Anaemia was present in 27.7% and gestational diabetes mellitus in 22.6% of the study population. Chronic hypertension was present in 14 % of patients. Gestational hypertension and preeclampsia was present in 5.3% and 6.4 % of patients respectively. Overt diabetes mellitus was present in 4.8% of patients.

In a random survey performed in various cities in India in 2002-2003, the prevalence of GDM was 16.2 per cent in Chennai, 15 per cent in Thiruvananthapuram, 21 per cent in Alwaye, 12 per cent in Bangalore, 18.8 per cent in Erode and 17.5 per cent in Ludhiana.[187]

There were 3 patients who were HBsAg seropositive and one patient who was Human immunodeficiency virus seropositive.

HOSPITAL ADMISSIONS

29% of the total population required hospital admission during their pregnancy. 21% of patients were admitted in the Obstetric ward. 4% of the patients were admitted in the medical ward alone. 3% were admitted both in obstetrics and medical ward and 1% required admission under other specialities.

Infections: The most common medical reason for hospital admission was for the management of some type of infection (13). Of the thirteen patients' the most common diagnosis was urinary tract infection (5), pyelonephritis (1), symptomatic neurocysticercosis (1), tubercular meningitis (1), acute bronchitis (1), dengue with thrombocytopenia (1), lower respiratory tract infection (1) and viral fever (1).

Anaemia: Five patients were admitted for management of severe anaemia in pregnancy. One patient was diagnosed to a have autoimmune haemolytic anaemia.

Hypertension: Four patients were admitted for the control of high blood pressure of which two patients had chronic hypertension. Two patients had preeclampsia

superimposed on chronic hypertension and one patient had Posterior reversible encephalopathy syndrome (PRES).

Cardiovascular diseases: Four patients were admitted for the management of cardiovascular disease namely pulmonary artery hypertension, paroxysmal tachycardia, coarctation of the aorta and Takayasu's arteritis.

Autoimmune disorders – The autoimmune disease were systemic lupus erythematosus with lupus nephritis (2 patients), undifferentiated connective tissue disease, Evans syndrome and antiphospholipid antibody syndrome.

In a study done by Ashakiran T. Rathod et al, out of the 765 obstetric admissions to ICU major conditions responsible were obstetric hemorrhage in 44.05 %, hypertensive disorders of pregnancy in 28.88 %, severe anemia in 14.37 %, heart disease in 12.15 %, and sepsis in 7.97 % of ICU cases.[188]

In a study by Appinabhavi A et al, non-obstetric cause of ICU admission (26 cases) were pneumonia (11), sepsis (3), hepatitis (4), anesthetic complication (1), aplastic anemia (1), cerebrovascular events with seizures (2), meningitis (1), SLE (2) and angioneurotic edema(1).[189]

PRIMARY OUTCOME

REASON FOR REFERRAL

Hypothyroidism: 22.1% patients were referred for the evaluation and management of hypothyroidism.

Hypertension: Sixty patients were referred for the management of high blood pressure. Of the 60 patients, 45 patients were diagnosed to have chronic hypertension at the clinic. Eleven patients were diagnosed to have gestational hypertension. One patient was admitted for further evaluation and was diagnosed to have coarctation of the aorta. This patient subsequently underwent medical termination of pregnancy. One patient was earlier diagnosed to have Takayasu's arteritis status post thoracic aortic stenting and was on Azathioprine.

In the study conducted by Sangeeta G et al hypertensive disorder was the commonest underlying cause for maternal mortality(37%).[190] Prabhu TR et al studied the cerebrovascular complications in pregnancy and puerperium and found that hypertension emerged as an important risk factor.[191] Bharti S et al noted that eclampsia, the occurrence of a seizure in association with preeclampsia, remains an important cause of maternal mortality and morbidity.[192]

Hyperglycaemia: 41 patients were referred for control of blood sugar. 30 patients were diagnosed to have gestational diabetes mellitus and 11 patients were diagnosed to have pregestational diabetes mellitus. Of these patients, 2 patients required hospital admission for glycaemic control.

Fever: Among the 27 patients who presented with fever, twenty also had cough as an associated symptom. Eight patients were diagnosed to have upper respiratory tract infection, 2 patients were diagnosed to have atypical pneumonia. Two patients were diagnosed as pyrexia of unknown origin. Six patients had undifferentiated febrile

illness. Two patients were diagnosed to have urinary tract infection. Three patients were diagnosed as post viral bronchitis.

Referral for Expert opinion: Twenty three patients were referred for expert opinion namely for clearance for MDT for Hansen's disease, irregularly irregular pulse, for cardiovascular examination, absent peripheral pulses, Takayasu's arteritis, for titration of anticoagulation and for change over from warfarin to heparin. Other reasons were optimization of antiepileptic drugs, distal renal tubular acidosis, focal segmental glomerulosclerosis, Class IV lupus nephritis, evaluation of thrombocytopenia, HIV seropositive, HBsAg seropositive, latent syphilis, rheumatoid arthritis and old spine tuberculosis, old cortical vein thrombosis.

FREQUENCY OF MEDICAL DISORDERS DIAGNOSED IN OMC

The most common diagnosis was hypothyroidism (25%) followed by some type of infection (17.5%) and chronic hypertension was the third most common problem (13.4%). 49 patients were diagnosed to have gestational diabetes mellitus (12.4%).

Ajmani SN et al found that the prevalence of hypothyroidism and hyperthyroidism was 12% and 1.25% respectively in their study population.[193]

In a study by Rajesh Rajput et al, GDM was diagnosed in 43 (7.1%) women based on ADA criteria.[185] Zargar et al found the prevalence of GDM to be 3.8 per cent in Kashmiri women. In a random survey performed in various cities in India in 2002-2003, an overall GDM prevalence of 16.55 per cent was observed.[187,194]

In another study done in Tamil Nadu, GDM was detected in 17.8 per cent women in urban, 13.8 per cent women in semiurban and 9.9 per cent women in rural areas.[195]

TYPE OF INFECTIONS DIAGNOSED IN OBSTETRIC MEDICINE CLINIC

The most common type of infection diagnosed at this clinic was an upper respiratory tract infection (28 patients). Acute bronchitis, lower respiratory tract infection, influenza and atypical community acquired pneumonia constituted a significant number of patients (21 patients). Nine patients had acute undifferentiated febrile illness and 5 patients had urinary tract infection. Two patients were evaluated for pyrexia of unknown origin. One patient was detected to have right pleural effusion.

One patient was diagnosed to have tuberculoma and one patient had tubercular meningitis in our study population. Khadilkar SS et al conducted prospective observational study analysing 10 years' experience of pregnancies complicated by tuberculosis. He found that severity of the disease reduced over the years and was found mainly in seropositive patients. Pregnancy outcome was not adversely affected except for a very high incidence of low birth weight babies.[196]

TYPE OF ANAEMIA DIAGNOSED IN OBSTETRIC MEDICINE CLINIC

Thirty eight patients (9.6% of the study population) were diagnosed to have anaemia in the clinic. 10 patients were diagnosed to have iron deficiency anaemia and 9 patients with B 12 deficiency. However in 11 patients the type of anaemia was unknown, since they did not follow up with investigations. Dimorphic anaemia was

present in 6 patients. Overall anaemia was present in 27 % of this study population at the time of delivery.

Shah AR et al found that the overall prevalence of anaemia in the studied women was observed to be 69.2% mostly in the second trimester of pregnancy. Only 72.6 % of the studied women had taken and consumed IFA tablets.[197]

Maru L et al reported in their study that maximum number of cases of anaemia was reported in the third trimester, multigravidas and in emergency cases of the 20-25 years age group. Most common type of anaemia was found to be dimorphic anaemia.[198]

TREATMENT RECEIVED IN OBSTETRIC MEDICINE CLINIC

Chronic hypertension: Out of the 55 patients, who were diagnosed to have chronic hypertension, 16 were advised home BP monitoring, 24 patients were on single antihypertensive and 3 patients required three antihypertensives for blood pressure control. The most common drug used was Labetalol followed by Nifedipine, Alphamethyldopa and Hydralazine.

In a study by Babbar K et al it was found that labetalol and nifedipine had decreased association from maternal and fetal side effects and comparatively better hypotensive action. Labetalol was safer, quicker in achieving adequate control of blood pressure with considerable prolongation of the duration of pregnancy with fewer side effects on the mother as well as the neonate.[199]

Use of low dose Aspirin in Patients at risk for developing preeclampsia:

According to the SOGC guidelines 2014, patients at risk for preeclampsia need to be initiated on low dose aspirin. The U.S. Preventive Services Task Force (USPSTF) recommends the use of low-dose aspirin (81 mg/d) as preventive medication after 12 weeks of gestation in women who are at high risk for preeclampsia.

In our study there were 100 patients with any of the above risk factors. 54 patients were on low dose aspirin and 46 were not on.

Patients with recurrent hypertensive disorder: In our population, 38 patients had hypertension detected in their previous pregnancy. Out of which 50% was diagnosed with chronic hypertension in the present pregnancy.

In a study by Surapaneni T et al, one in four pregnant women with preeclampsia developed recurrence in their subsequent pregnancies.[200]

OVERALL MATERNAL AND FOETAL OUTCOME

Out of the 393 patients, 78 patients were yet to deliver at the end of the study period. Outcome data could be gathered for only 307 patients. Eight patients could not be contacted and were lost to follow up. The mean gestational age at delivery for the 307 patients was 36.75 ± 4.6 weeks. 37.4% patients (115 patients) in this study underwent caesarean delivery. In the National vital statistics report 2015, in the United States the caesarean delivery rate was 32%.[201]

Maternal complications were present in 37 patients. The single most common maternal complication was postpartum haemorrhage which was present in 9 patients.

This was followed by urinary tract infections (8 patients) and postpartum fever in 6 patients. There were no maternal deaths. The mean birth weight was calculated on 294 patients which was 2.8 ± 0.596 kg. Birth weight data was not available for 13 deliveries since these were 1st or 2nd trimester abortions. There were 16 still births or abortions among the 307 patients.

Gestational Age at Delivery

There were 291 patients who had live births. 80% patients delivered at term and the rest were preterm.

Bad Foetal Outcome

There were 16 abortions and 1 neonatal death among the 307 patients who delivered. The mean age of the patient was 26.19 years with standard deviation of 3.67 years. Nine patients were in their first pregnancy. Four patients had prior abortions.

In a study by Deepti Singh et al, the hazard ratio of having a spontaneous abortion was six times (HR = 5.7, *P* <0.01) more among the women who had a spontaneous abortion in a previous pregnancy outcome than those who had a live birth as a previous pregnancy outcome (HR = 1.00).[202]

Causes for Medical Termination of Pregnancy

Out of 16 foetal deaths, 7 were medical termination of pregnancy for the following reasons.

1. SLE Class IV Lupus nephritis with autoimmune haemolytic anaemia and posterior reversible encephalopathy syndrome (15 weeks)

2. Chronic hypertension with severe preeclampsia, HELLP syndrome (26 weeks)
3. Coarctation of the aorta (11 weeks)
4. Takayasu's arteritis (13 weeks)
5. Adult onset nephrotic syndrome (18 weeks)
6. Prelabour premature rupture of membranes (19 weeks)
7. Holoprosencephaly (20 weeks)

Intrauterine deaths

Two patients presented to OMC at 26 weeks and 29 weeks with respiratory tract symptoms and were diagnosed to have upper respiratory infection and viral bronchitis respectively. They were treated symptomatically. Both these patients had no significant antenatal risk factors or past medical illness. They presented with intrauterine death at 28 weeks and 32 weeks.

One patient came for evaluation of pyrexia of unknown origin at 20 weeks and was advised admission, however was not willing. She was noted to have two prior abortions and one live issue with ectodermal dysplasia. She was diagnosed with intrauterine death at 32 weeks elsewhere.

One patient was previously diagnosed with APLA syndrome, secondary Evans syndrome, chronic hypertension and hypothyroidism. She presented at 13 weeks of gestation for evaluation of thrombocytopenia. She was advised to continue antihypertensive, hydroxychloroquine, low molecular weight heparin, corticosteroid, human immunoglobulin and thyroxine. However she also presented with an intrauterine death (27 weeks of gestation).

Two patients who were noted to have missed abortions (7 weeks and 18 weeks) were earlier diagnosed to have hypothyroidism and were on thyroxine.

SECONDARY OUTCOMES

CORRELATION OF AGE, GRAVIDA AND FAMILY HISTORY WITH MEDICAL DISORDERS IN PREGNANCY

25.2% of patients with a family history of hypertension (1st degree relative) were found to have chronic hypertension (p <0.001). 12.6% of patients with family history of hypertension developed preeclampsia (p- 0.003). 30.5% of patients with family history of diabetes mellitus were noted to have gestational diabetes mellitus (p- 0.01). There is statistically significant correlation of family history of diabetes mellitus and pregestational diabetes (p <0.001). There is no correlation of family history of hypertension with gestational hypertension (p- 0.323).

In a study by Rajesh Rajput et al, a significantly higher per cent of women with GDM had positive family history of diabetes mellitus. Seshiah et al observed a significant association between the family history of diabetes mellitus and the occurrence of GDM among pregnant women.[185]

SG Kumar et al in a case control study, found that family history of hypertension (OR- 5.4), history of pregnancy induced hypertension in earlier pregnancy (OR- 9.63), were significantly associated with preeclampsia.[203]

In our study there was no statistically significant correlation between age (≥ 35 years) or gravida (primigravida) and presence or absence of chronic hypertension. There is

no statistically significant correlation between age (≥ 35 years) and gravida (primigravida/multigravida) and presence or absence of preeclampsia and gestational hypertension.

In the study done by SG Kumar et al, age group was not found to be significantly associated with preeclampsia.[203] In a study by Kunjam S et al in Rajasthan, 74.1% of patients with gestational diabetes mellitus were above the age of 25 years.[184]

There is no statistically significant correlation between age (> 35 years) or gravida (primigravida/multigravida) and presence or absence of gestational diabetes mellitus (GDM).

There was no statistically significant correlation of age (≥35 years) and gravida (primigravida) with anaemia, hypothyroidism, B12 deficiency, asthma, autoimmune disease or infections. 41.4% of patients over the age of 35 years had history of treatment for infertility ($p < 0.001$)

CORRELATION OF MEDICAL DISEASES WITH MATERNAL AND FOETAL OUTCOME

1. GESTATIONAL AGE AT DELIVERY

In this study we found that, 58.3 % of patients with preeclampsia delivered preterm (<37 weeks of gestation) ($p < 0.001$). 54.8% of patients with chronic hypertension delivered preterm ($p < 0.001$) 66.7% of patients with autoimmune disease delivered preterm. ($p < 0.001$). There was no statistically significant correlation between the other medical diseases and gestational age at delivery.

2. FOETAL COMPLICATION

41.7% of patients with preeclampsia developed foetal complications (p- 0.012). There is a statistically significant correlation of chronic hypertension with presence of foetal complications (p <0.001). 55.6% of patients with autoimmune disease developed foetal complications (p <0.001)

3. LOW BIRTH WEIGHT

There is a statistically significant correlation of chronic hypertension (p <0.001) and preeclampsia (p- 0.002) with low birth weight. There was a statistically significant correlation of autoimmune disease with low birth weight (p- 0.001). However only 15 patients with autoimmune disease delivered during the study period. There was no statistically significant correlation of gestational diabetes, diabetes mellitus, anaemia, hypothyroidism, infections, asthma, vitamin B12 deficiency and infertility

There was no statistically significant correlation of anaemia with low birth weight in this study. Studies show a significantly higher risk of LBW and preterm birth with anaemia in the first or second trimester.[204]

In A study by S R. A. Odegard et al, severe and early onset preeclampsia was associated with significant fetal growth restriction. The risk of having an SGA infant was dramatically higher in women with recurrent preeclampsia.[205]

4. MODE OF DELIVERY

63.6% of patients with a risk factor of preeclampsia underwent lower segment caesarean section (LSCS). (p- 0.015). 9 out of 12 patients with diabetes mellitus underwent LSCS. (p- 0.014)

A. M. Panaitesc et al conducted a cohort study in a population of 109,932 pregnancies, which included 1417 (1.3%) women with chronic hypertension. After adjusting for potential confounding variables from maternal characteristics, medical and obstetric history, chronic hypertension was associated with increased risk of stillbirth, preeclampsia, small for gestational age, GDM, iatrogenic preterm birth (< 37 weeks) and elective caesarean delivery.[206]

The caesarean delivery rate in the pregestational diabetes mellitus group was significantly higher than the control group in a study conducted in China by Chen HT et al.[207]

LIMITATIONS

The limitations of this study were the following

1. This is an observational study. There was no randomization or intervention done to assess the difference in the outcome measures.
2. Controls were not recruited. If the pregnant cohort were compared with age matched individuals who were not referred to the obstetric medicine clinic, the significance of the outcome and associations could have been described more objectively.
3. The patients were only followed up at the time they came for review in the obstetric medicine clinic. Other complications or illness for which the patient sought medical care elsewhere were not recorded. Knowing this would have helped understand its impact on maternal and final foetal outcome.
4. Treatment advised at this clinic may have been modified in case the patient was referred to other specialities for the same reason. This could have modified the outcomes.
5. A larger community based study would help in finding the actual incidence of the common medical illnesses in the community. As this is a tertiary care hospital, the disease representation may not reflect the actual population's disease spectrum due to a referral bias.

CONCLUSION

This study describes the clinical profile of patients attending the obstetric medicine clinic at a tertiary care centre in south India.

The conclusions of this study are as follows

1. The mean age of our study population was 27 years, which was older in comparison to what is seen in Indian literature on pregnant women.
2. The most common reason for referral to the obstetric medicine clinic was for the evaluation and management of hypothyroidism.
3. The other common reasons were for evaluation of respiratory tract symptoms, cardiac symptoms such as breathlessness, control of blood pressure and blood sugar.
4. The most common medical disorder diagnosed in the clinic was hypothyroidism followed by infections, chronic hypertension and gestational diabetes mellitus.
5. The other significant medical illnesses were asthma, anaemia, autoimmune disease such as systemic lupus erythematosus, APLA syndrome, Takaysu's arteritis and coarctation of the aorta.
6. Rare diseases were tuberculosis (tubercular meningitis and tuberculoma), hyperthyroidism and renal disease such as chronic kidney disease and distal renal tubular acidosis.

7. 28% of the study population required hospital admission for various reasons. 7% of patients required admission under General Medicine for the management of infections, hypertension and autoimmune disease.
8. 41% of patients above the age of 35 years were treated for infertility which was statistically significant. There was no significant correlation of age with the other common medical illnesses.
9. Out of the 393 patients who were recruited to this study over an 11 month period, maternal and foetal outcome was available for 307 patients. The mean gestational age at delivery was 36 weeks. The mean birth weight was 2.8 kg and 57% patients delivered vaginally.
10. Maternal complications were present in 37 patients. The single most common maternal complication was postpartum haemorrhage. There were no maternal deaths.
11. Foetal complications were seen in 60 patients. There were 16 abortions and 1 neonatal death. Seven of theses pregnancies had to be medically terminated. Two patients had presented to the clinic in the 2nd trimester with a respiratory tract infection.
12. Chronic hypertension had a statistically significant correlation with preterm delivery, foetal complication and low birth weight.
13. The Obstetric Medicine clinic at this hospital helps cater to a large proportion of patients requiring urgent expert opinion on the various medical disorders complicating pregnancy. This will enable early targeted intervention resulting in reduced maternal morbidity and mortality.

SUGGESTIONS FOR FUTURE RESEARCH

1. A larger study which is community based will enable us to ascertain the true incidence of the various medical disorders in pregnancy.
2. Follow up of the patients who attended the clinic over several months postpartum, would enable us to access the long term impact of medical diseases in pregnancy.
3. To undertake a randomized trial with matched controls of patients with specific medical illnesses complicating pregnancy and to investigate its impact on maternal and foetal outcome in the south Indian population.
4. The role of the obstetric physician in a tropical country like India also includes care of patients with infectious diseases. Guidelines for care of pregnant women with infections have to be drawn separately in the context of local epidemiology.

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ANNEXURES

I. DEFINITIONS

1. **Hypertension**

Hypertension in pregnancy is defined as a blood pressure of greater than or equal to 140mmHg (systolic) or 90 mmHg (diastolic) on at least two measurements, ideally separated by a period of rest. Severe hypertension is defined as a blood pressure of greater than 160–170/110 mmHg. Systolic hypertension of greater than 180 mmHg is a medical emergency.[32] Hypertensive disorders of pregnancy can be subclassified into four groups – chronic hypertension, gestational hypertension, preeclampsia-eclampsia and superimposed preeclampsia in the setting of chronic hypertension.[39] Hypertension detected for the first time after 20 weeks of pregnancy and in the absence of any other features of preeclampsia is classified as gestational hypertension. The classical definition of preeclampsia is new onset hypertension in pregnancy after 20 weeks with proteinuria.

2. **Asthma**

The diagnosis of asthma in pregnancy is confirmed when spirometry shows a reduced FEV1 or ratio of FEV1 to forced vital capacity, with a 12% or greater improvement in FEV1 after the administration of inhaled albuterol confirms.[208,209]

3. **Thyroid disorder**

The upper limit for TSH is 2.5 mIU/L in the first trimester, and 3.0 mIU/L in the second and third trimesters. The lower physiological limit could be 0.1 mIU/L in the first trimester, 0.2 mIU/L in the second, and 0.3 mIU/L in the third.[210]

Overt hypothyroidism is defined as a clinical syndrome of hypothyroidism associated with elevated TSH and decreased serum levels of T4 or T3. Subclinical hypothyroidism is defined as a condition without typical symptoms of hypothyroidism, elevated TSH (>5 μU/mL), and normal circulating thyroid hormone.

Overt thyrotoxicosis is defined as the syndrome of hyperthyroidism associated with suppressed TSH and elevated serum levels of T4 or T3. Subclinical thyrotoxicosis is devoid of symptoms, but TSH is suppressed although there are normal circulating levels of thyroid hormone.[211]

4. **Anaemia in pregnancy**

Anaemia is defined as haemoglobin level less than 11 mg/dl. Mild anaemia is defined as a haemoglobin value between 10 and 11 mg/dl. Moderate anaemia is a haemoglobin value between 7 to 10 mg/dl and severe anaemia the haemoglobin is lower than 7 mg/dl.[212,213]

5. **Gestational diabetes mellitus**

Gestational diabetes mellitus (GDM) has been defined as any degree of glucose intolerance with onset or first recognition during pregnancy.[214]

Table 36: GDM diagnostic threshold values

		Plasma glucose concentration thresholds (mg/dl)			
Organization	**OGTT glucose load**	**Fasting**	**1-hour**	**2-hour**	**3-hour**
ADA*	100 g	95	180	155	140
ACOG*	100 g	105	190	165	145
WHO§	75 g	126	-	140	-
IADPSG§	75 g	92	180	153	-

Adapted from Gestational diabetes mellitus: why screen and how to diagnose . Hippokratia. 2010 Jul-Sep

*Diagnosis of GDM if two or more glucose values equal to or exceeding the threshold values §Diagnosis of GDM if one or more glucose values equal to or exceeding the threshold values GDM: Gestational Diabetes Mellitus, OGTT: Oral Glucose Tolerance Test, ADA: American Diabetes Association, ACOG: American Council of Obstetricians and Gynecologists, WHO: World Health Organization, IADPSG: International Association of Diabetes and Pregnancy Groups

6. **Overt diabetes mellitus**

For the identification of overt diabetes during pregnancy and its distinction from GDM, the IADPSG recommends that fasting plasma glucose (FPG) or glycosylated hemoglobin (A1c) should be measured at the first prenatal visit on all or only high-risk women (depending on the frequency of diabetes in the background population and on local cicrumstances).[215] Values equal to or above 126 mg/dl and 6.5% (for FPG and A1c, respectively) establish the diagnosis of overt diabetes.

7. Asymptomatic bactriuria

Asymptomatic bacteriuria occurs when there is colonization of particularly the lower part of the urinary tract. Initially a growth of 10^5 colony forming units (CFUs)/mL of a single organisms growing on 2 separate properly collected urine samples was required to diagnose asymptomatic bacteriuria.[216] It has also been reported that suggests that even lower colony count ($\geq 10^2$–10^3 CFUs/mL) can also demonstrate active sepsis and can lead to upper urinary tract infection in pregnant women.

8. Acute cystitis

Acute cystitis presents with clinical features of dysuria along with frequency and urgency with no other findings to suggest bacteremia. A single causative organism with 10^5colony forming units must be isolated to diagnose cystitis.[217]

9. Acute febrile illness

Acute febrile illness in pregnancy is defined as fever for less than a total of 14 days with a recorded temperature of more than 100.4 for more than 48 hours requiring admission.

Acute febrile illness in peripartum and post-partum being defined as fever more than 100.8 degrees on 2 separate occasions at least 24 hours after delivery.

10. Pyelonephritis:

Acute pyelonephritis defined as presence of urinary tract infection by urine routine and microscopy with more than >8-12 white blood cell count, and <2-4 epithelial cells and urine culture of more than >100,000 colony forming units as well as clinical findings of flank pain, renal angle tenderness along with fever more than 100.4.[218]

11. Pneumonia/lower respiratory tract infection:

Fever more than 100.4 F, cough and shortness of breath associated with respiratory findings consistent with the same high counts and with /without CXR findings.[219]

12. Influenza like illness:

Influenza-like illness was defined by fever (>100.4 F), plus cough or sore throat.[220]

13. Influenza

Fever more than 100.4 F along with cough, sore throat and positive throat swab for H1N1/H3N1.[220]

14. Dengue fever

Dengue IgM positive + other serology negative OR seroconversion on convalescent sera.[221]

15. Dengue hemorrhagic fever (DHF):

Presence of thrombocytopenia along with fulfillment of criteria for dengue.[221]

16. Dengue shock syndrome (DSS):

Fulfillment of criteria for dengue hemorrhagic fever along with hypotension.[221]

17. Systemic lupus erythematosus (SLE)

SLE is diagnosed in the presence of 4 or more of the following criteria (atleast 1 clinical and 1 laboratory criteria) or biopsy proven lupus nephritis with positive ANA or anti DsDNA.(Table 37)

Table 37: SLICC criteria for diagnosis of SLE

Clinical Criteria

1. Acute cutaneous lupus

2. Chronic cutaneous lupus

3. Oral ulcers/nasal ulcrs

4. Nonscarring alopecia

5. Synovitis involving two or more joints, characterized by swelling or effusion OR tenderness in 2 or more joints and thirty minutes or more of morning stiffness.

6. Serositis:pleural and pericardial

7. Renal: Urine protein/creatinine (or 24 hr urine protein) representing 500 mg of protein/24 hr or Red blood cell casts

8. Neurologic: seizures/psychosis/mononeuritis multiplex/myelitis/peripheral or cranial neuropathy/acute confusional state

9. Hemolytic anemia

10. Leukopenia (< 4000/mm3 at least once)/Lymphopenia (< 1000/mm3 at least once)

11. Thrombocytopenia (<100,000/mm3) at least once

Immunological Criteria

1. ANA above laboratory reference range

2. Anti-dsDNA above laboratory reference range, except ELISA: twice above laboratory reference range

3. Anti-Sm

4. Antiphospholipid antibody:lupus anticoagulant/false-positive RPR/medium or high titer anticardiolipin (IgA, IgG or IgM)/anti-β2 glycoprotein I (IgA, IgG or IgM)

5. Low complement :low C3, C4, CH50

6. Direct Coombs test in the absence of hemolytic anemia

Adapted from Derivation and Validation of Systemic Lupus International Collaborating Clinics Classification Criteria for Systemic Lupus Erythematosus Arthritis Rheum. 2012 Aug; 64(8): 2677–2686.

18. Tuberculosis in Pregnancy

Diagnosis of pulmonary tuberculosis

Symptoms of TB are cough, lassitude, lethargy, listlessness, and persistent fever for more than 15 days. At least two out of the three sputum smears should be

acid-fast bacillus positive to label the patient smear.

Extrapulmonary tuberculosis

Along with the symptoms produced by the organs affected, a pregnant woman with extrapulmonary TB may also have constitutional TB features. Investigations corresponding to the site of affection are carried out to establish diagnosis, e.g. fine-needle aspiration cytology (FNAC) testing, biopsy samples taken for external lympadenopathies, or pleural, ascitic, or pericardial tappings in the respective effusions. A guarded lumbar puncture may be carried out to confirm tuberculous

Meningitis. Sterile pyuria with positive Montoux test in a pregnant woman may suggest renal TB positive.[222]

II. PATIENT INFORMATION SHEET

Christian Medical College, Vellore
Department of Medicine 3

Clinical profile of patients attending the Obstetric Medicine Clinic in a tertiary care Centre in South India

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You are being requested to participate in a study looking at the clinical profile of pregnant patients attending the Obstetric Medicine Clinic at CMC Vellore. The study will be done over a period of 1 year starting from September 2016 to August 2017.

If you take part what will you have to do?

If you agree to participate in this study, you will be requested to answer a questionnaire regarding your name, age, place of residence, education, occupation and your husband's occupation. We will ask the date of your last menstrual period in order to calculate your weeks of gestation. We will record the reason why you came to this clinic and details of any prior treatment received. The questionnaire will also include your details of any previous pregnancy, medical problems and complications and your family history. We will also contact you for any review visits during the course of the study. You may be contacted through telephone post-delivery to know the health of the baby and mother.

All other treatments that you are already on will be continued and your regular treatment will not be changed during this study.

No additional procedures or blood tests will be conducted routinely for this study. If at any time you experience any problems, you will be expected to come for review with your primary physician.

Can you withdraw from this study after it starts?

Your participation in this study is entirely voluntary and you are also free to decide to withdraw permission to participate in this study. If you do so, this will not affect your usual treatment at this hospital in any way.

What will happen if you develop any study related injury?

We do not expect any injury to happen to you as a result of participating in the study. It involves only answering a questionnaire during a scheduled visit to the doctor.

Will you have to pay for the study?

You will not need to pay any amount for participating in the study. You will be interviewed during your scheduled visit only and will not be asked to come to the hospital at any other time. Travel expenses will not be compensated.

Any other treatment that you usually take will continue but the usual arrangements that you have with the hospital will decide how much you pay for this.

What happens after the study is over?

You may or may not benefit from the study. Once the study is over, if we find any information of significance to patient care, this will be incorporated in the guidelines for future patients.

Will your personal details be kept confidential?

The results of this study will be published in a medical journal but you will not be identified by name in any publication or presentation of results. However, your medical notes may be reviewed by people associated with the study, without your additional permission, should you decide to participate in this study.

If you have any further questions, please ask Dr. Dan Mathew Luke (tel: 0416 2282039/ 9894223226) or email: med3@cmcvellore.ac.in, danmathewluke@yahoo.co.in

III. INFORMED CONSENT FORM FOR SUBJECTS

Informed Consent form to participate in a research study

Study Title: Clinical profile of patients attending the Obstetric Medicine Clinic in a tertiary care Centre in South India

Study Number: _____

Subject's Initials: _____ Subject's Name: _____

Date of Birth / Age: _____ (Subject)

(i) I confirm that I have read and understood the information sheet dated _____ for the above study and have had the opportunity to ask questions. [ ]

(ii) I understand that my participation in the study is voluntary and that I am free to withdraw at any time, without giving any reason, without my medical care or legal rights being affected. [ ]

(iii) I understand that the Ethics Committee and the regulatory authorities will not need my permission to look at my health records both in respect of the current study and any further research that may be conducted in relation to it, even if I withdraw from the trial. I agree to this access. However, I understand that my identity will not be revealed in any information released to third parties or published. [ ]

(iv) I agree not to restrict the use of any data or results that arise from this study provided such a use is only for scientific purpose(s). [ ]

(v) I agree to take part in the above study. [ ]

Signature (or Thumb impression) of the Subject/Legally Acceptable

Date: _____/_____/_____

Signatory's Name: _____ Signature:

Or

Representative: _____

Date: _____/_____/_____

Signatory's Name: _____

Signature of the Investigator: _____

Date: _____/_____/_____

Study Investigator's Name: _____

Signature or thumb impression of the Witness: _____

Date: _____/_____/_____

Name & Address of the Witness: _____

IV. CLINICAL RESEARCH FORM

Clinical Research Form

Clinical profile of patients attending the Obstetric Medicine Clinic in a tertiary care centre in South India

Christian Medical College Vellore

Serial number:
Date of visit :

Socio-demographic data

Name		Gravida	
Hospital Number		Parity	
Age		Living	
Place of residence		Abortion	
Phone number		SB/ND/VM/MTP	
Occupation		LMP	
Spouse occupation		Weeks of gestation	

Antenatal Risk factors

	Treatment details		Treatment details
Hypertension		HIV/HBsAg seropos	
GDM/Pregest DM		Infertility	
Anemia*		IUGR	
Hypo/hyperthyroidism		Preterm	
Oligo/polyhydramnios		Others	
Rh negative		Congenital anomalies	
Multifetal pregnancy		Past obstetric events	

*Hemoglobin < 11 mg % (WHO)

Reason for Referral

Anemia		Urinary tract infection	
Hypertension		Fever	
GDM / Pregest DM		Seizure disorder	
Hypothyroidism		Heart disease	
Respiratory tract infection		Breathlessness	
Asthma		Palpitation	
Connective tissue disease		Others	

Past History

	Duration	Treatment details		Duration	Treatment details
Chr hypertension			RHD		
Diabetes Mellitus			Jaundice		
Asthma			Obstetric surgery		
Connective tissue disease			Non obs surgery		
Seizure disorder			Others		
Tuberculosis					

Medication history (Other than haematinics and Calcium)

Drug	Dosage	Duration (Date)

Family History

Hypertension		Tuberculosis	
Diabetes		Jaundice	
Thyroid disorder		Multifetal pregnancy	
Asthma		Congenital Anomalies	

Examination- (primary visit)

Pallor Icterus Cyanosis Clubbing Lymphadenopathy Pedal oedema JVP			
Others			
Height		Temperature	
Weight		Thyroid	
BMI		Breast	
Pulse rate		CVS	
BP		RS	
Respiratory rate		Abdomen	
Peripheral pulse		CNS	

Impression

	Diagnosis	Treatment advised in OMC

Details of hospital admissions

Date	Diagnosis	Treatment

Details of review visits

Number of review visits :		
Date	Reason for review	Treatment

Outcome Measures

Gestational age at delivery	
Birth weight	
Mode of delivery	
M T P. If Yes, specify Reason	
Maternal complication	
Foetal complication	

V. IRB APPROVAL LETTER

OFFICE OF RESEARCH
INSTITUTIONAL REVIEW BOARD (IRB)
CHRISTIAN MEDICAL COLLEGE, VELLORE, INDIA

Dr. B.J. Prashantham, M.A., M.A., Dr. Min (Clinical)
Director, Christian Counseling Center,
Chairperson, Ethics Committee.

Dr. Anna Benjamin Pulimood, M.B.B.S., MD., Ph.D.,
Chairperson, Research Committee & Principal

Dr. Biju George, M.B.B.S., MD., DM.,
Deputy Chairperson,
Secretary, Ethics Committee, IRB
Additional Vice-Principal (Research)

June 24, 2017

Dr. Dan Mathew Luke,
PG Registrar,
Department of Medicine,
Christian Medical College,
Vellore – 632 002.

Sub: **Fluid Research Grant NEW PROPOSAL:**
Clinical profile of patents attending file Obstetric Medicine Clinic in a Tertiary care Centre in South India.
Dr. Dan Mathew Luke, Employment Number: 28976, Post graduate student f Department of General Medicine / Unit lll, Dr. Sowmya Sathyendra, Employment Number: 28181 Professor and Head of Medicine Unit III, Dr. Sudhajasmine, Employment Number: 28296, Professor- Department of Medicine Unit III, Ms. Tunny Sebastian Employment Number: 32291 Lecturer, Department of Biostatistics.

Ref: IRB Min. No. 10626 [OBSERVE] dated 03.04.2017

Dear Dr. Dan Mathew Luke,

The Institutional Review Board (**Blue**, Research and Ethics Committee) of the Christian Medical College, Vellore, reviewed and discussed your project titled "Clinical profile of patents attending file Obstetric Medicine Clinic in a Tertiary care Centre in South India" on April 03rd 2017.

The Committee reviewed the following documents:

1. IRB Application format
2. Consent forms and Informed Consent forms,
3. Cvs of Drs. Sowmya, Sudha, Dan Mathew, Tunny Sebastian.
4. Proforma
5. No. of documents 1 – 4.

The following Institutional Review Board (Blue, Research & Ethics Committee) members were present at the meeting held on April 03rd 2017 in the CK Job Hall, Christian Medical College, Bagayam, Vellore 632002.

Ethics Committee Blue, Office of Research, 1st Floor, Carman Block, Christian Medical College, Vellore, Tamil Nadu 632 002
Tel: 0416 – 2284294, 2284202 Fax: 0416 – 2262788, 2284481 E-mail: research@cmcvellore.ac.in

B.J. Prashantham, M.A., M.A., Dr. Min (Clinical)
irector, Christian Counseling Center,
Chairperson, Ethics Committee.

Dr. Anna Benjamin Pulimood, M.B.B.S., MD., Ph.D.,
Chairperson, Research Committee & Principal

Dr. Biju George, M.B.B.S., MD., DM.,
Deputy Chairperson,
Secretary, Ethics Committee, IRB
Additional Vice-Principal (Research)

Name	Qualification	Designation	Affiliation
Dr. Biju George	MBBS, MD, DM	Professor, Haematology, Research), Additional Vice Principal , Deputy Chairperson (Research Committee), Member Secretary (Ethics Committee), IRB, CMC, Vellore	Internal, Clinician
Dr. B. J. Prashantham	MA(Counseling Psychology), MA (Theology), Dr. Min (Clinical Counselling)	Chairperson, Ethics Committee, IRB. Director, Christian Counseling Centre, Vellore	External, Social Scientist
Dr. Ratna Prabha	MBBS, MD (Pharma)	Associate Professor, Clinical Pharmacology, CMC, Vellore	Internal, Pharmacologist
Dr. Rekha Pai	BSc, MSc, PhD	Associate Professor, Pathology, CMC, Vellore	Internal, Basic Medical Scientist
Dr. Jayaprakash Muliyil	BSC, MBBS, MD, MPH, Dr PH (Epid), DMHC	Retired Professor, CMC, Vellore	External, Scientist & Epidemiologist
Mr. C. Sampath	BSc, BL	Advocate, Vellore	External, Legal Expert
Ms. Grace Rebekha	M.Sc., (Biostatistics)	Lecturer, Biostatistics, CMC, Vellore	Internal, Statistician
Dr. Sowmya Sathyendra	MBBS, MD (Gen. Medicine)	Professor, Medicine III, CMC, Vellore	Internal, Clinician
Dr. Santhanam Sridhar	MBBS, DCH, DNB	Professor, Neonatology, CMC, Vellore	Internal, Clinician
Dr. Thomas V Paul	MBBS, MD, DNB, PhD	Professor,Endocrinology, CMC, Vellore	Internal, Clinician
Dr Sneha Varkki	MBBS, DCH, DNB	Professor, Paediatrics, CMC, Vellore	Internal, Clinician
Dr. Sathish Kumar	MBBS, MD, DCH	Professor, Child Health, CMC, Vellore	Internal, Clinician

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Deputy Chairperson,
Secretary, Ethics Committee, IRB
Additional Vice-Principal (Research)

Dr. Anuradha Rose	MBBS, MD, MHSC (Bioethics)	Associate Professor, Community Health, CMC, Vellore	Internal, Clinician
Dr. Ajith Sivadasan	MD, DM	Professor, Neurological Sciences, CMC, Vellore	Internal, Clinician
Dr. Visalakshi. J	MPH, PhD	Lecturer, Biostatistics, CMC, Vellore	Internal, Statistician
Mrs. Pattabiraman	BSc, DSSA	Social Worker, Vellore	External, Lay Person
Dr. Mathew Joseph	MBBS, MCH	Professor, Neurosurgery, CMC, Vellore	Internal, Clinician
Dr. Shyam Kumar NK	MBBS, DMRD, DNB, FRCR, FRANZCR	Professor, Radiology, CMC, Vellore	Internal, Clinician

We approve the project to be conducted as presented.

Kindly provide the total number of patients enrolled in your study and the total number of withdrawals for the study entitled: "Clinical profile of patents attending file Obstetric Medicine Clinic in a Tertiary care Centre in South India" on a monthly basis. Please send copies of this to the Research Office (research@cmcvellore.ac.in).

Yours sincerely,

Dr. Biju George
Secretary (Ethics Committee)
Institutional Review Board

Dr. BIJU GEORGE
MBBS., MD., DM.
SECRETARY - (ETHICS COMMITTEE)
Institutional Review Board,
Christian Medical College, Vellore - 632 002.

IRB Min. No. 10626 [OBSERVE] dated 03.04.2017

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VI. ABSTRACT

Setting

This is an observational study conducted in the department of General Medicine at Christian Medical College Hospital, Vellore over a period of 11 months. All pregnant patients attending the Obstetric Medicine clinic, who newly register or are referred, from September 2016 to July 2017, were enrolled.

Design

This is an observational study with a follow up of a historical cohort. The historical cohort consists of patients who attend the clinic from September 2016 to March 2017. The prospective cohort consists of patients who attend the clinic from April 2017 to July 2017.

Objective

To study the common reasons for referral to the Obstetric Medicine clinic

To ascertain the frequency of common medical disorders in pregnancy

To study maternal and fetal outcomes of patients referred to the Obstetric Medicine clinic

To determine the correlation between age and frequency of medical disorders

Participants

All pregnant patients who attend the Obstetric Medicine clinic are enrolled at their first visit. All patients below the age of 18 years as per hospital records were excluded. Postnatal patients who may also be referred to this clinic were excluded. Patients who refused an informed consent were excluded.

Results

In this study 445 patients attended the Obstetric Medicine clinic from September 2016 to July 2017. Out of which 52 were excluded. 393 patients were included in the analysis. 78 patients were yet to deliver at the end of the study period and 8 were lost to follow up. Hence 307 patient outcomes were available. The mean age of the population was 27±4.9 years. 49.4% were primigravida. Mean gestational age at delivery was 36±4.6 weeks. The mean birth weight was 2.8 ±0.5 kg. 57.3% delivered vaginally. 20% of patients delivered preterm and 25% were low birth weight. There were 16 abortions and 1 neonatal death. There were no maternal deaths. The most common reason for referral was for the evaluation of hypothyroidism (22.1%) followed by respiratory tract symptoms (20.4%), cardiac symptoms, control of blood pressure and blood sugar. The most common diagnosis made in the Obstetric Medicine clinic was hypothyroidism (25.4%), infections (17.5%) and chronic hypertension (13.4%). There was no correlation of age (≥35 years) and the common medical diseases in pregnancy. There was a significant correlation of chronic hypertension and preeclampsia with preterm birth (p <0.001), low birth weight (p- 0.002, <0.001) and other fetal complication (p- 0.012, <0.001). There was a significant association of family history of diabetes mellitus with gestational diabetes (p- 0.01) and family history of hypertension with chronic hypertension (p <0.001) and preeclampsia (p- 0.003).

Outcome:

The most common reason for referral was for management of hypothyroidism. There was no correlation of age (≥35 years) with the common medical disorders. There was a significant

correlation of chronic hypertension and preeclampsia with preterm birth, low birth weight and foetal complication.

Conclusion

This study illustrates the importance of an Obstetric Medicine referral clinic in helping manage the common medical illness and describes its impact on maternal and fetal outcome. Early diagnosis and targeted intervention can result in reducing the maternal and fetal morbidity and mortality.

VII: DATA SET

	BG	BH	BI	BJ	BK	BL	BM	BN	BO	BP	BQ	BR	BS	BT	BU	BV	BW	BX	BY	BZ	CA	CB	CC	CD	CE	CF	CG	CH	CI	CJ	CK	CL	CM	CN	CO	CP	CQ	CR	CS	CT	CU	CV	CW	CX	CY	CZ	DA	DB	DC	DD	DE	DF	DG	DH	DI	DJ	DK	DL	DM
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13	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		4	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE
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21	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGI	1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE
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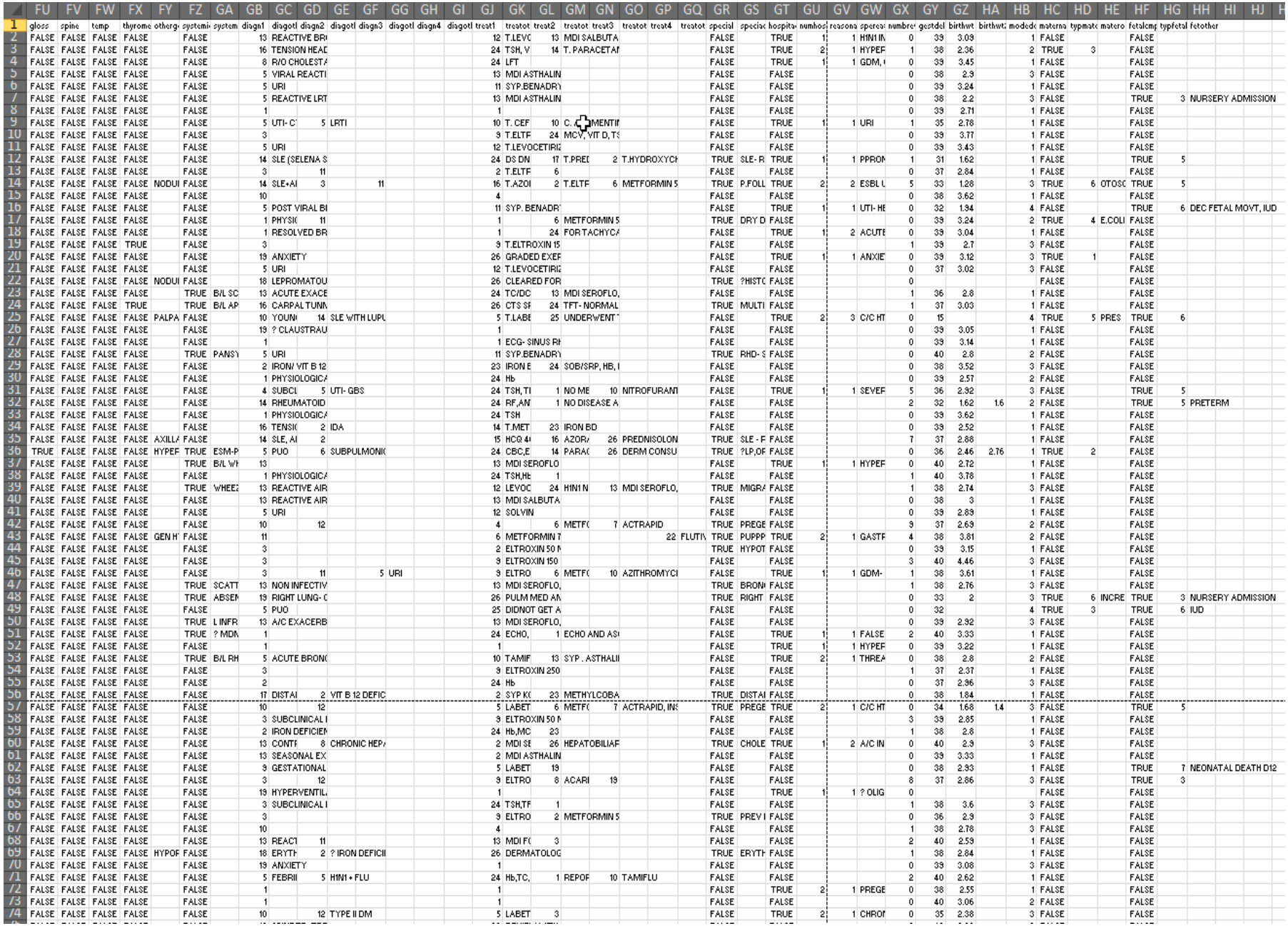

	FU	FV	FW	FX	FY	FZ	GA	GB	GC	GD	GE	GF	GG	GH	GI	GJ	GK	GL	GM	GN	GO	GP	GQ	GR	GS	GT	GU	GV	GW	GX	GY	GZ	HA	HB	HC	HD	HE	HF	HG	HH	HI	HJ
1	gloss	spine	temp	thyrome	otherg	systemi	system	diagn1	diagotl	diagn2	diagotl	diagn3	diagotl	diagn4	diagotl	treat1	treatot	treat2	treatot	treat3	treatot	treat4	treatot	special	specia	hospita	numhos	reasona	spsrea	numbre	gestdel	birthwt	birthwt	modedc	materna	typmate	matero	fetalcmp	typfetal	fetother		
2	FALSE	FALSE	FALSE	FALSE		FALSE		13	REACTIVE BR							12	T.LEVO	13	MDI SALBUTA					FALSE		TRUE	1	1	HIN1 IN	0	39	3.09		1	FALSE			FALSE				
3	FALSE	FALSE	FALSE	FALSE		FALSE		16	TENSION HEAD							24	TSH, V	14	T. PARACETAI					FALSE		TRUE	2	1	HYPEF	1	38	2.36		2	TRUE	3		FALSE				
4	FALSE	FALSE	FALSE	FALSE		FALSE		8	R/O CHOLEST/							24	LFT							FALSE		TRUE	1	1	GDM, (	0	39	3.45		1	FALSE			FALSE				
5	FALSE	FALSE	FALSE	FALSE		FALSE		5	VIRAL REACTI							13	MDI ASTHALIN							FALSE		FALSE				0	38	2.9		3	FALSE			FALSE				
6	FALSE	FALSE	FALSE	FALSE		FALSE		5	URI							11	SYP.BENADRY							FALSE		FALSE				0	39	3.24		1	FALSE			FALSE				
7	FALSE	FALSE	FALSE	FALSE		FALSE		5	REACTIVE LRT							13	MDI ASTHALIN							FALSE		FALSE				0	38	2.2		3	FALSE			TRUE	3	NURSERY ADMISSION		
8	FALSE	FALSE	FALSE	FALSE		FALSE		1								1								FALSE		FALSE				0	39	2.71		1	FALSE			FALSE				
9	FALSE	FALSE	FALSE	FALSE		FALSE		5	UTI- C	5	LRTI					10	T. CEF	10	C. A	MENTIN				FALSE		TRUE	1	1	URI	1	35	2.78		1	FALSE			FALSE				
10	FALSE	FALSE	FALSE	FALSE		FALSE		3								3	T.ELTF	24	MCV, VIT D, TS					FALSE		FALSE				0	39	3.77		1	FALSE			FALSE				
11	FALSE	FALSE	FALSE	FALSE		FALSE		5	URI							12	T.LEVOCETIRIZ							FALSE		FALSE				0	39	3.43		1	FALSE			FALSE				
12	FALSE	FALSE	FALSE	FALSE		FALSE		14	SLE (SELENA S							24	DS DN	17	T.PRED	2	T.HYDROXYCH			TRUE	SLE- R	TRUE	1	1	PPROM	1	31	1.62		1	FALSE			TRUE	5			
13	FALSE	FALSE	FALSE	FALSE		FALSE		3		11						2	T.ELTF	6						FALSE		FALSE				0	37	2.84		1	FALSE			FALSE				
14	FALSE	FALSE	FALSE	FALSE	NODUI	FALSE		14	SLE+AI	3		11				16	T.AZOI	2	T.ELTF	6	METFORMIN	5		TRUE	P.FOLL	TRUE	2	2	ESBL U	5	33	1.28		3	TRUE	6	OTOSC	TRUE	5			
15	FALSE	FALSE	FALSE	FALSE		FALSE		10								4								FALSE		FALSE				0	38	3.62		1	FALSE			FALSE				
16	FALSE	FALSE	FALSE	FALSE		FALSE		5	POST VIRAL BI							11	SYP. BENADR							FALSE		TRUE	1	1	UTI- HE	0	32	1.94		4	FALSE			TRUE	6	DEC FETAL MOVT, IUD		
17	FALSE	FALSE	FALSE	FALSE		FALSE		1	PHYSIC	11						1		6	METFORMIN	5				TRUE	DRY D	FALSE				0	39	3.24		2	TRUE	4	E.COLI	FALSE				
18	FALSE	FALSE	FALSE	FALSE		FALSE		1	RESOLVED BR							1		24	FOR TACHYCA					FALSE		TRUE	1	2	ACUTE	0	39	3.04		1	FALSE			FALSE				
19	FALSE	FALSE	FALSE	TRUE		FALSE		3								3	T.ELTROXIN	15						FALSE		FALSE				1	39	2.7		3	FALSE			FALSE				
20	FALSE	FALSE	FALSE	FALSE		FALSE		19	ANXIETY							26	GRADED EXEF							FALSE		TRUE	1	1	ANXIE	0	39	3.12		3	TRUE	1		FALSE				
21	FALSE	FALSE	FALSE	FALSE		FALSE		5	URI							12	T.LEVOCETIRIZ							FALSE		FALSE				0	37	3.02		3	FALSE			FALSE				
22	FALSE	FALSE	FALSE	FALSE	NODUI	FALSE		18	LEPROMATOU							26	CLEARED FOR							TRUE	?HISTC	FALSE				0					FALSE			FALSE				
23	FALSE	FALSE	FALSE	FALSE		TRUE	B/L SC	13	ACUTE EXACE							24	TC/DC	13	MDI SEROFLO,					FALSE		FALSE				1	36	2.8		1	FALSE			FALSE				
24	FALSE	FALSE	FALSE	TRUE		TRUE	B/L AP	16	CARPAL TUNN							26	CTS SF	24	TFT- NORMAL					TRUE	MULTI	FALSE				1	37	3.03		1	FALSE			FALSE				
25	FALSE	FALSE	FALSE	FALSE	PALPA	FALSE		10	YOUNI	14	SLE WITH LUPU					5	T.LABE	25	UNDERWENT					FALSE		TRUE	2	3	C/C HT	0	15			4	TRUE	5	PRES	TRUE	6			
26	FALSE	FALSE	FALSE	FALSE		FALSE		19	? CLAUSTRAU							1								FALSE		FALSE				0	39	3.05		1	FALSE			FALSE				
27	FALSE	FALSE	FALSE	FALSE		FALSE		1								1	ECG- SINUS RH							FALSE		FALSE				0	39	3.14		1	FALSE			FALSE				
28	FALSE	FALSE	FALSE	FALSE		TRUE	PANSY	5	URI							11	SYP.BENADRY							TRUE	RHD- S	FALSE				0	40	2.8		2	FALSE			FALSE				
29	FALSE	FALSE	FALSE	FALSE		FALSE		2	IRON/ VIT B 12							23	IRON E	24	SOB/SRP, HB, I					FALSE		FALSE				0	38	3.52		3	FALSE			FALSE				
30	FALSE	FALSE	FALSE	FALSE		FALSE		1	PHYSIOLOGIC/							24	Hb							FALSE		FALSE				0	39	2.57		2	FALSE			FALSE				
31	FALSE	FALSE	FALSE	FALSE		FALSE		4	SUBCL	5	UTI- GBS					24	TSH, TI	1	NO ME	10	NITROFURANT			FALSE		TRUE	1	1	SEVEF	5	36	2.92		3	FALSE			TRUE	5			
32	FALSE	FALSE	FALSE	FALSE		FALSE		14	RHEUMATOID							24	RF, AN	1	NO DISEASE A					FALSE		FALSE				2	32	1.62	1.6	2	FALSE			TRUE	5	PRETERM		
33	FALSE	FALSE	FALSE	FALSE		FALSE		1	PHYSIOLOGIC/							24	TSH							FALSE		FALSE				0	39	3.62		1	FALSE			FALSE				
34	FALSE	FALSE	FALSE	FALSE		FALSE		16	TENSI	2	IDA					14	T.MET	23	IRON BD					FALSE		FALSE				0	39	2.52		1	FALSE			FALSE				
35	FALSE	FALSE	FALSE	FALSE	AXILLA	FALSE		14	SLE, AI	2						15	HCQ 4	16	AZOR/	26	PREDNISOLON			TRUE	SLE - F	FALSE				7	37	2.88		1	FALSE			FALSE				
36	TRUE	FALSE	FALSE	FALSE	HYPEF	TRUE	ESM-P	5	PUO	6	SUBPULMONI					24	CBC,E	14	PARA	26	DERM CONSU			TRUE	?LP,OF	FALSE				0	36	2.46	2.76	1	TRUE	2		FALSE				
37	FALSE	FALSE	FALSE	FALSE		TRUE	B/L WH	13								13	MDI SEROFLO							FALSE		TRUE	1	1	HYPEF	0	40	2.72		1	FALSE			FALSE				
38	FALSE	FALSE	FALSE	FALSE		FALSE		1	PHYSIOLOGIC/							24	TSH,Ht	1						FALSE		FALSE				1	40	3.78		1	FALSE			FALSE				
39	FALSE	FALSE	FALSE	FALSE		TRUE	WHEE	13	REACTIVE AIR							12	LEVOC	24	H1N1 N	13	MDI SEROFLO,			TRUE	MIGRA	FALSE				1	38	2.74		3	FALSE			FALSE				
40	FALSE	FALSE	FALSE	FALSE		FALSE		13	REACTIVE AIR							13	MDI SALBUTA							FALSE		FALSE				0	38	3		1	FALSE			FALSE				
41	FALSE	FALSE	FALSE	FALSE		FALSE		5	URI							12	SOLVIN							FALSE		FALSE				0	39	2.89		1	FALSE			FALSE				
42	FALSE	FALSE	FALSE	FALSE		FALSE		10		12						4		6	METF	7	ACTRAPID			TRUE	PREGE	FALSE				9	37	2.69		2	FALSE			FALSE				
43	FALSE	FALSE	FALSE	FALSE	GEN H	FALSE		11								6	METFORMIN	7				22	FLUTIV	TRUE	PUPPP	TRUE	2	1	GASTF	4	38	3.81		2	FALSE			FALSE				
44	FALSE	FALSE	FALSE	FALSE		FALSE		3								2	ELTROXIN 50	M						TRUE	HYPOT	FALSE				0	39	3.15		1	FALSE			FALSE				
45	FALSE	FALSE	FALSE	FALSE		FALSE		3								3	ELTROXIN 150							FALSE		FALSE				3	40	4.46		3	FALSE			FALSE				
46	FALSE	FALSE	FALSE	FALSE		FALSE		3		11		5	URI			3	ELTRO	6	METF	10	AZITHROMYCI			FALSE		TRUE	1	1	GDM-	1	38	3.61		1	FALSE			FALSE				
47	FALSE	FALSE	FALSE	FALSE		TRUE	SCATT	13	NON INFECTIV							13	MDI SEROFLO,							TRUE	BRON	FALSE				1	38	2.76		3	FALSE			FALSE				
48	FALSE	FALSE	FALSE	FALSE		TRUE	ABSEN	19	RIGHT LUNG- C							26	PULM MED AN							TRUE	RIGHT	FALSE				0	33	2		3	TRUE	6	INCRE	TRUE	3	NURSERY ADMISSION		
49	FALSE	FALSE	FALSE	FALSE		FALSE		5	PUO							25	DIDNOT GET A							FALSE		FALSE				0	32			4	TRUE	3		TRUE	6	IUD		
50	FALSE	FALSE	FALSE	FALSE		TRUE	L INFR	13	A/C EXACERB							13	MDI SEROFLO,							FALSE		FALSE				0	39	2.92		3	FALSE			FALSE				
51	FALSE	FALSE	FALSE	FALSE		TRUE	? MDN	1								24	ECHO,	1	ECHO AND AS					FALSE		TRUE	1	1	FALSE	2	40	3.33		1	FALSE			FALSE				
52	FALSE	FALSE	FALSE	FALSE		FALSE		1								1								FALSE		TRUE	1	1	HYPEF	0	39	3.22		1	FALSE			FALSE				
53	FALSE	FALSE	FALSE	FALSE		TRUE	B/L RH	5	ACUTE BRON							10	T.AMIF	13	SYP . ASTHALI					FALSE		TRUE	2	1	THREA	0	38	2.8		2	FALSE			FALSE				
54	FALSE	FALSE	FALSE	FALSE		FALSE		3								3	ELTROXIN 250							FALSE		FALSE				1	37	2.37		1	FALSE			FALSE				
55	FALSE	FALSE	FALSE	FALSE		FALSE		2								24	Hb							FALSE		FALSE				0	37	2.96		3	FALSE			FALSE				
56	FALSE	FALSE	FALSE	FALSE		FALSE		17	DISTAI	2	VIT B 12 DEFIC					2	SYP K(	23	METHYLCOBA					TRUE	DISTAI	FALSE				0	38	1.84		1	FALSE			FALSE				
57	FALSE	FALSE	FALSE	FALSE		FALSE		10		12						5	LABET	6	METF	7	ACTRAPID, INS			TRUE	PREGE	TRUE	2	1	C/C HT	0	34	1.68	1.4	3	FALSE			TRUE	5			
58	FALSE	FALSE	FALSE	FALSE		FALSE		3	SUBCLINICAL I							9	ELTROXIN 50	M						FALSE		FALSE				3	39	2.85		1	FALSE			FALSE				
59	FALSE	FALSE	FALSE	FALSE		FALSE		2	IRON DEFICIEN							24	Hb,MC	23						FALSE		FALSE				1	38	2.8		1	FALSE			FALSE				
60	FALSE	FALSE	FALSE	FALSE		FALSE		13	CONTF	8	CHRONIC HEP/					2	MDI SE	26	HEPATOBILIAF					TRUE	CHOLE	TRUE	1	2	A/C IN	0	40	2.9		3	FALSE			FALSE				
61	FALSE	FALSE	FALSE	FALSE		FALSE		13	SEASONAL EX							2	MDI ASTHALIN							FALSE		FALSE				0	39	3.33		1	FALSE			FALSE				
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65	FALSE	FALSE	FALSE	FALSE		FALSE		3	SUBCLINICAL I							24	TSH,TF	1						FALSE		FALSE				1	38	3.6		3	FALSE			FALSE				
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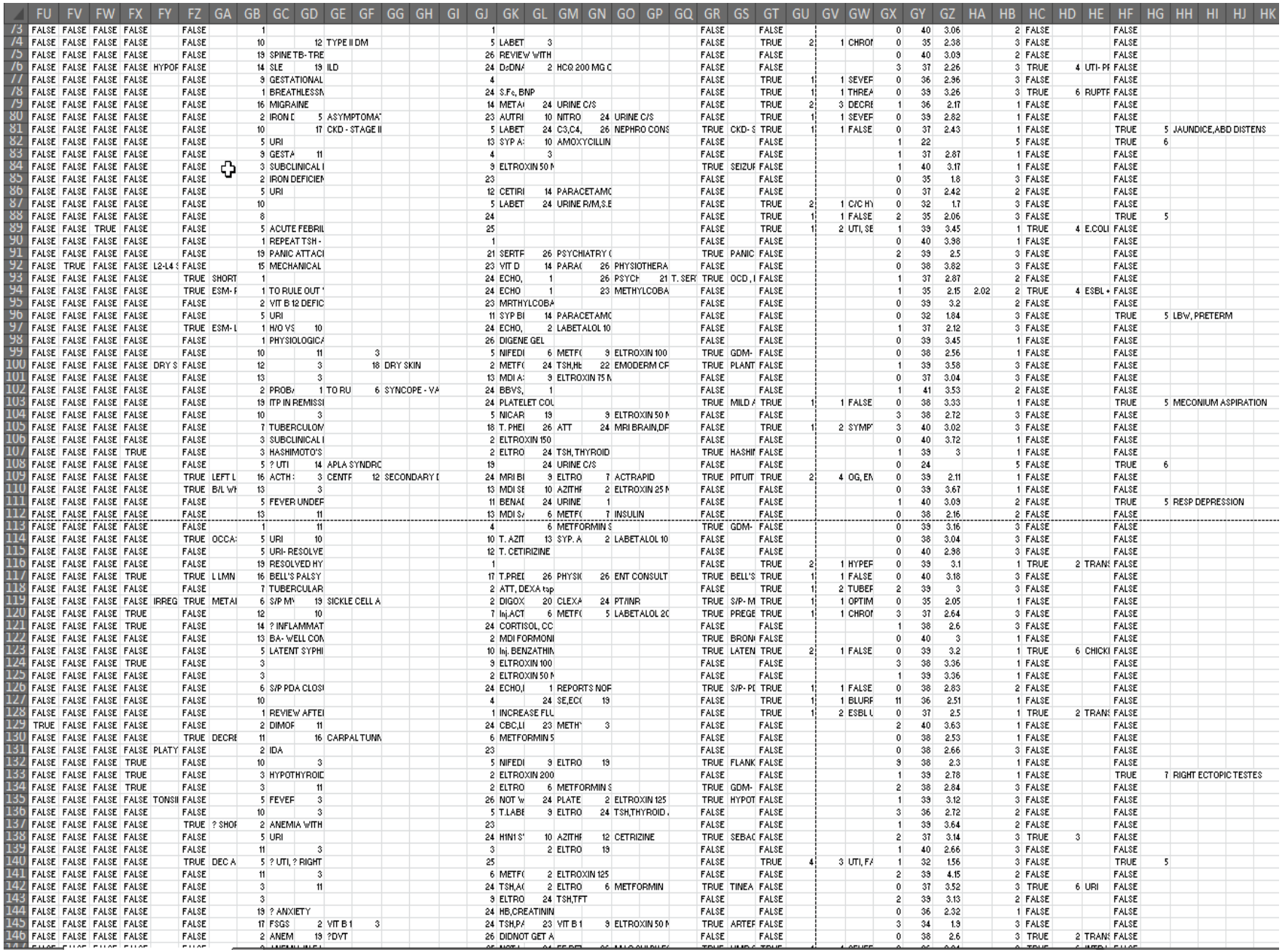
69	FALSE	FALSE	FALSE	FALSE	HYPOF	FALSE		18	ERYTH	2	? IRON DEFICII					26	DERMATOLOG							TRUE	ERYTH	FALSE				1	38	2.84		1	FALSE			FALSE				
70	FALSE	FALSE	FALSE	FALSE		FALSE		19	ANXIETY							1								FALSE		FALSE				0	39	3.08		3	FALSE			FALSE				
71	FALSE	FALSE	FALSE	FALSE		FALSE		5	FEBRII	5	H1N1 + FLU					24	Hb,TC,	1	REPOF	10	TAMIFLU			FALSE		FALSE				2	40	2.62		1	FALSE			FALSE				
72	FALSE	FALSE	FALSE	FALSE		FALSE		1								1								FALSE		TRUE	2	1	PREGE	0	38	2.55		1	FALSE			FALSE				
73	FALSE	FALSE	FALSE	FALSE		FALSE		1								1								FALSE		FALSE				0	40	3.06		2	FALSE			FALSE				
74	FALSE	FALSE	FALSE	FALSE		FALSE		10		12	TYPE II DM					5	LABET	3						FALSE		TRUE	2	1	CHRON	0	35	2.38		3	FALSE			FALSE				



	FU	FV	FW	FX	FY	FZ	GA	GB	GC	GD	GE	GF	GG	GH	GI	GJ	GK	GL	GM	GN	GO	GP	GQ	GR	GS	GT	GU	GV	GW	GX	GY	GZ	HA	HB	HC	HD	HE	HF	HG	HH	HI	HJ	HK
73	FALSE	FALSE	FALSE	FALSE		FALSE		1								1								FALSE		FALSE				0	40	3.06		2	FALSE			FALSE					
74	FALSE	FALSE	FALSE	FALSE		FALSE		10		12	TYPE II DM					5	LABET	3						FALSE		TRUE	2	1	CHRON	0	35	2.38		3	FALSE			FALSE					
75	FALSE	FALSE	FALSE	FALSE		FALSE		19	SPINE TB- TRE							26	REVIEW WITH							FALSE		FALSE				0	40	3.09		2	FALSE			FALSE					
76	FALSE	FALSE	FALSE	FALSE	HYPOF	FALSE		14	SLE	19	ILD					24	DsDNA	2	HCQ 200 MG C					FALSE		FALSE				3	37	2.26		3	TRUE	4	UTI- PE	FALSE					
77	FALSE	FALSE	FALSE	FALSE		FALSE		9	GESTATIONAL							4								FALSE		TRUE	1	1	SEVER	0	36	2.96		3	FALSE			FALSE					
78	FALSE	FALSE	FALSE	FALSE		FALSE		1	BREATHLESSN							24	S.Fe, BNP							FALSE		TRUE	1	1	THREA	0	39	3.26		3	TRUE	6	RUPTF	FALSE					
79	FALSE	FALSE	FALSE	FALSE		FALSE		16	MIGRAINE							14	METAI	24	URINE C/S					FALSE		TRUE	2	3	DECRE	1	36	2.17		1	FALSE			FALSE					
80	FALSE	FALSE	FALSE	FALSE		FALSE		2	IRON D	5	ASYMPTOMAT					23	AUTRI	10	NITRO	24	URINE C/S			FALSE		TRUE	1	1	SEVER	0	39	2.82		1	FALSE			FALSE					
81	FALSE	FALSE	FALSE	FALSE		FALSE		10		17	CKD - STAGE II					5	LABET	24	C3,C4,	26	NEPHRO CONS			TRUE	CKD- S	TRUE	1	1	FALSE	0	37	2.43		1	FALSE			TRUE	5	JAUNDICE,ABD DISTENS			
82	FALSE	FALSE	FALSE	FALSE		FALSE		5	URI							13	SYP A:	10	AMOXYCILLIN					FALSE		FALSE				1	22			5	FALSE			TRUE	6				
83	FALSE	FALSE	FALSE	FALSE		FALSE		3	GESTA	11						4		3						FALSE		FALSE				1	37	2.87		1	FALSE			FALSE					
84	FALSE	FALSE	FALSE	FALSE		FALSE		3	SUBCLINICAL I							9	ELTROXIN 50 M							TRUE	SEIZUI	FALSE				1	40	3.17		1	FALSE			FALSE					
85	FALSE	FALSE	FALSE	FALSE		FALSE		2	IRON DEFICIEN							23								FALSE		FALSE				0	35	1.8		3	FALSE			FALSE					
86	FALSE	FALSE	FALSE	FALSE		FALSE		5	URI							12	CETIRI	14	PARACETAMO					FALSE		FALSE				0	37	2.42		2	FALSE			FALSE					
87	FALSE	FALSE	FALSE	FALSE		FALSE		10								5	LABET	24	URINE R/M,S.E					FALSE		TRUE	2	1	C/C HY	0	32	1.7		3	FALSE			FALSE					
88	FALSE	FALSE	FALSE	FALSE		FALSE		8								24								FALSE		TRUE	1	1	FALSE	2	35	2.06		3	FALSE			TRUE	5				
89	FALSE	FALSE	TRUE	FALSE		FALSE		5	ACUTE FEBRIL							25								FALSE		TRUE	1	2	UTI, SE	1	39	3.45		1	TRUE	4	E.COLI	FALSE					
90	FALSE	FALSE	FALSE	FALSE		FALSE		1	REPEAT TSH -							1								FALSE		FALSE				0	40	3.38		1	FALSE			FALSE					
91	FALSE	FALSE	FALSE	FALSE		FALSE		19	PANIC ATTACI							21	SERTF	26	PSYCHIATRY (					TRUE	PANIC	FALSE				2	39	2.5		3	FALSE			FALSE					
92	FALSE	TRUE	FALSE	FALSE	L2-L4 S	FALSE		15	MECHANICAL							23	VIT D	14	PARA(	26	PHYSIOTHERA			FALSE		FALSE				0	38	3.82		3	FALSE			FALSE					
93	FALSE	FALSE	FALSE	FALSE		TRUE	SHORT	1								24	ECHO,	1		26	PSYCH	21	T. SER	TRUE	OCD , I	FALSE				1	37	2.87		2	FALSE			FALSE					
94	FALSE	FALSE	FALSE	FALSE		TRUE	ESM- F	1	TO RULE OUT '							24	ECHO	1		23	METHYLCOBA			FALSE		FALSE				1	35	2.15	2.02	2	TRUE	4	ESBL +	FALSE					
95	FALSE	FALSE	FALSE	FALSE		FALSE		2	VIT B 12 DEFIC							23	MRTHYLCOBA							FALSE		FALSE				0	39	3.2		2	FALSE			FALSE					
96	FALSE	FALSE	FALSE	FALSE		FALSE		5	URI							11	SYP BI	14	PARACETAMO					FALSE		FALSE				0	32	1.84		3	FALSE			TRUE	5	LBW, PRETERM			
97	FALSE	FALSE	FALSE	FALSE		TRUE	ESM- L	1	H/O VS	10						24	ECHO,	2	LABETALOL 10					FALSE		FALSE				1	37	2.12		3	FALSE			FALSE					
98	FALSE	FALSE	FALSE	FALSE		FALSE		1	PHYSIOLOGICA							26	DIGENE GEL							FALSE		FALSE				0	39	3.45		1	FALSE			FALSE					
99	FALSE	FALSE	FALSE	FALSE		FALSE		10		11		3				5	NIFEDI	6	METF(	9	ELTROXIN 100			TRUE	GDM-	FALSE				0	38	2.56		1	FALSE			FALSE					
100	FALSE	FALSE	FALSE	FALSE	DRY S	FALSE		12		3		18	DRY SKIN			2	METF(	24	TSH,HE	22	EMODERM CF			TRUE	PLANT	FALSE				1	39	3.58		3	FALSE			FALSE					
101	FALSE	FALSE	FALSE	FALSE		FALSE		13		3						13	MDI A:	9	ELTROXIN 75 M					FALSE		FALSE				0	37	3.04		3	FALSE			FALSE					
102	FALSE	FALSE	FALSE	FALSE		FALSE		2	PROB/	1	TO RU	6	SYNCOPE - VA			24	BBVS,	1						FALSE		FALSE				1	41	3.53		2	FALSE			FALSE					
103	FALSE	FALSE	FALSE	FALSE		FALSE		19	ITP IN REMISSI							24	PLATELET COU							TRUE	MILD A	TRUE	1	1	FALSE	0	38	3.33		1	FALSE			TRUE	5	MECONIUM ASPIRATION			
104	FALSE	FALSE	FALSE	FALSE		FALSE		10		3						5	NICAR	19		9	ELTROXIN 50 M			FALSE		FALSE				3	38	2.72		3	FALSE			FALSE					
105	FALSE	FALSE	FALSE	FALSE		FALSE		7	TUBERCULOM							18	T. PHEI	26	ATT	24	MRI BRAIN,DF			FALSE		TRUE	1	2	SYMP	3	40	3.02		3	FALSE			FALSE					
106	FALSE	FALSE	FALSE	FALSE		FALSE		3	SUBCLINICAL I							2	ELTROXIN 150							FALSE		FALSE				0	40	3.72		1	FALSE			FALSE					
107	FALSE	FALSE	FALSE	TRUE		FALSE		3	HASHIMOTO'S							2	ELTRO	24	TSH, THYROID					TRUE	HASHI	FALSE				1	39	3		1	FALSE			FALSE					
108	FALSE	FALSE	FALSE	FALSE		FALSE		5	? UTI	14	APLA SYNDRC					19		24	URINE C/S					FALSE		FALSE				0	24			5	FALSE			TRUE	6				
109	FALSE	FALSE	FALSE	FALSE		TRUE	LEFT L	16	ACTH :	3	CENTF	12	SECONDARY I			24	MRI BI	9	ELTRO	7	ACTRAPID			TRUE	PITUIT	TRUE	2	4	OG, EN	0	39	2.11		1	FALSE			FALSE					
110	FALSE	FALSE	FALSE	FALSE		TRUE	B/L WE	13		3						13	MDI SE	10	AZITHI	2	ELTROXIN 25 M			FALSE		FALSE				0	39	3.67		1	FALSE			FALSE					
111	FALSE	FALSE	FALSE	FALSE		FALSE		5	FEVER UNDEF							11	BENAI	24	URINE	1				FALSE		FALSE				1	40	3.09		2	FALSE			TRUE	5	RESP DEPRESSION			
112	FALSE	FALSE	FALSE	FALSE		FALSE		13		11						13	MDI S/	6	METF(	7	INSULIN			FALSE		FALSE				0	38	2.16		2	FALSE			FALSE					
113	FALSE	FALSE	FALSE	FALSE		FALSE		1		11						4		6	METFORMIN S					TRUE	GDM-	FALSE				0	39	3.16		3	FALSE			FALSE					
114	FALSE	FALSE	FALSE	FALSE		TRUE	OCCA:	5	URI	10						10	T. AZIT	13	SYP. A	2	LABETALOL 10			FALSE		FALSE				0	38	3.04		3	FALSE			FALSE					
115	FALSE	FALSE	FALSE	FALSE		FALSE		5	URI- RESOLVE							12	T. CETIRIZINE							FALSE		FALSE				0	40	2.98		3	FALSE			FALSE					
116	FALSE	FALSE	FALSE	FALSE		FALSE		19	RESOLVED HY							1								FALSE		TRUE	2	1	HYPEF	0	39	3.1		1	TRUE	2	TRANS	FALSE					
117	FALSE	FALSE	FALSE	TRUE		TRUE	L LMN	16	BELL'S PALSY							17	T.PREI	26	PHYSIC	26	ENT CONSULT			TRUE	BELL'S	TRUE	1	1	FALSE	0	40	3.18		3	FALSE			FALSE					
118	FALSE	FALSE	FALSE	FALSE		FALSE		7	TUBERCULAR							2	ATT, DEXA tsp							FALSE		TRUE	1	2	TUBEF	2	39	3		3	FALSE			FALSE					
119	FALSE	FALSE	FALSE	FALSE	IRREG	TRUE	METAI	6	S/P MV	19	SICKLE CELL A					2	DIGOX	20	CLEXA	24	PT/INR			TRUE	S/P- M	TRUE	1	1	OPTIM	0	35	2.05		1	FALSE			FALSE					
120	FALSE	FALSE	FALSE	TRUE		FALSE		12		10						7	Inj.ACT	6	METF(	5	LABETALOL 20			TRUE	PREGE	TRUE	1	1	CHRON	3	37	2.64		3	FALSE			FALSE					
121	FALSE	FALSE	FALSE	TRUE		FALSE		14	? INFLAMMAT							24	CORTISOL, CC							FALSE		FALSE				1	38	2.6		3	FALSE			FALSE					
122	FALSE	FALSE	FALSE	FALSE		FALSE		13	BA- WELL CON							2	MDI FORMONI							TRUE	BRONI	FALSE				0	40	3		1	FALSE			FALSE					
123	FALSE	FALSE	FALSE	FALSE		FALSE		5	LATENT SYPHI							10	Inj. BENZATHIN							TRUE	LATEN	TRUE	2	1	FALSE	0	39	3.2		1	TRUE	6	CHICKI	FALSE					
124	FALSE	FALSE	FALSE	TRUE		FALSE		3								9	ELTROXIN 100							FALSE		FALSE				3	38	3.36		1	FALSE			FALSE					
125	FALSE	FALSE	FALSE	FALSE		FALSE		3								2	ELTROXIN 50 M							FALSE		FALSE				1	39	3.36		1	FALSE			FALSE					
126	FALSE	FALSE	FALSE	FALSE		FALSE		6	S/P PDA CLOSI							24	ECHO,I	1	REPORTS NOF					TRUE	S/P- PI	TRUE	1	1	FALSE	0	38	2.83		2	FALSE			FALSE					
127	FALSE	FALSE	FALSE	FALSE		FALSE		10								4		24	SE,EC(	19				FALSE		TRUE	1	1	BLURF	11	36	2.51		1	FALSE			FALSE					
128	FALSE	FALSE	FALSE	FALSE		FALSE		1	REVIEW AFTEI							1	INCREASE FLU							FALSE		TRUE	1	2	ESBL U	0	37	2.5		1	TRUE	2	TRANS	FALSE					
129	TRUE	FALSE	FALSE	FALSE		FALSE		2	DIMOF	11						24	CBC,LI	23	METH	3				FALSE		FALSE				2	40	3.63		1	FALSE			FALSE					
130	FALSE	FALSE	FALSE	FALSE		TRUE	DECRE	11		16	CARPAL TUNN					6	METFORMIN 5							FALSE		FALSE				0	38	2.53		1	FALSE			FALSE					
131	FALSE	FALSE	FALSE	FALSE	PLATY	FALSE		2	IDA							23								FALSE		FALSE				0	38	2.66		3	FALSE			FALSE					
132	FALSE	FALSE	FALSE	TRUE		FALSE		10		3						5	NIFEDI	9	ELTRO	19				TRUE	FLANK	FALSE				9	38	2.3		1	FALSE			FALSE					
133	FALSE	FALSE	FALSE	TRUE		FALSE		3	HYPOTHYROID							2	ELTROXIN 200							FALSE		FALSE				1	39	2.78		1	FALSE			TRUE	7	RIGHT ECTOPIC TESTES			
134	FALSE	FALSE	FALSE	TRUE		FALSE		3		11						2	ELTRO	6	METFORMIN S					TRUE	GDM-	FALSE				2	38	2.84		3	FALSE			FALSE					
135	FALSE	FALSE	FALSE	FALSE	TONSII	FALSE		5	FEVEF	3						26	NOT W	24	PLATE	2	ELTROXIN 125			TRUE	HYPOT	FALSE				1	39	3.12		3	FALSE			FALSE					
136	FALSE	FALSE	FALSE	FALSE		FALSE		10		3						5	T.LABE	9	ELTRO	24	TSH,THYROID ,			FALSE		FALSE				3	36	2.72		2	FALSE			FALSE					
137	FALSE	FALSE	FALSE	FALSE		TRUE	? SHOF	2	ANEMIA WITH							23								FALSE		FALSE				1	39	3.64		2	FALSE			FALSE					
138	FALSE	FALSE	FALSE	FALSE		FALSE		5	URI							24	H1N1 S'	10	AZITHI	12	CETRIZINE			TRUE	SEBAC	FALSE				2	37	3.14		3	TRUE	3		FALSE					
139	FALSE	FALSE	FALSE	FALSE		FALSE		11		3						3		2	ELTRO	19				FALSE		FALSE				1	40	2.66		3	FALSE			FALSE					
140	FALSE	FALSE	FALSE	FALSE		TRUE	DEC A	5	? UTI, ? RIGHT							25								FALSE		TRUE	4	3	UTI, FA	1	32	1.56		3	FALSE			TRUE	5				
141	FALSE	FALSE	FALSE	FALSE		FALSE		11		3						6	METF(	2	ELTROXIN 125					FALSE		FALSE				2	39	4.15		2	FALSE			FALSE					
142	FALSE	FALSE	FALSE	FALSE		FALSE		3		11						24	TSH,A(	2	ELTRO	6	METFORMIN			TRUE	TINEA	FALSE				0	37	3.52		3	TRUE	6	URI	FALSE					
143	FALSE	FALSE	FALSE	FALSE		FALSE		3								9	ELTRO	24	TSH,TFT					FALSE		FALSE				2	39	3.13		2	FALSE			FALSE					
144	FALSE	FALSE	FALSE	FALSE		FALSE		19	? ANXIETY							24	HB,CREATININ							FALSE		FALSE				0	36	2.32		1	FALSE			FALSE					
145	FALSE	FALSE	FALSE	FALSE		FALSE		17	FSGS	2	VIT B 1	3				24	TSH,P/	23	VIT B 1	9	ELTROXIN 50 M			TRUE	ARTEF	FALSE				3	34	1.9		3	FALSE			FALSE					
146	FALSE	FALSE	FALSE	FALSE		FALSE		2	ANEMI	19	?DVT					26	DIDNOT GET A							FALSE		FALSE				0	38	2.6		3	TRUE	2	TRANS	FALSE					

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	AB	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ	AR	AS
143		######	ANJUM	3849167	FALSE		FALSE	TRUE	29	CHITTOO	9E+09	7	7	3	1	0	1	16	TRUE	FALSE	TRUE	FALSE	FALSE	TRUE	TRUE	1	FALSE	FALSE		FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	TRUE		TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE
144		######	LALITH	7616466	FALSE		FALSE	TRUE	26	VELLORE	9E+09	7	6	3	1	1	1	37	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE
145		######	SHEELA	7260000	FALSE		FALSE	TRUE	41	VALAJA	9E+09			1	0	0	0	33	TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE		FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
146		######	SUMATI	7617419	FALSE		FALSE	TRUE	25	CHITTOO	9E+09	7	4	3	1	1	1	19	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE
147		######	PRIYA	5398327	FALSE		FALSE	TRUE	28	VELLORE	9E+09	7	6	1	0	0	0	10	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
148		######	PREMA	7086327	FALSE		FALSE	TRUE	37	VELLORE	9E+09	7	3	2	0	0	1	8	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
149		######	GOVIND	7018936	FALSE		FALSE	TRUE	28	VALAJA	9E+09	7	5	4	1	1	2	10	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE
150		######	AJANTH	9177946	FALSE		FALSE	TRUE	36	RANIPET		7		5	1	1	3	26	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
151		######	AMMU	9220403	FALSE		FALSE	TRUE	24	TIRUPA	9E+09	7	3	2	1	1	0	9	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE
152		######	ANITHA	9346190	FALSE		FALSE	TRUE	32	ARCOT	9E+09	1		2	1	1	0	30	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	DHMORE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
153		######	SOUMYA	9658952	FALSE		FALSE	TRUE	25	CHITTOO	9E+09			1	0	0	0	26	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
154		######	KOMALA	5193940	FALSE		FALSE	TRUE	29	VELLORE	8E+09	2		1	0	0	0	16	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
155		######	KALPAN	6394564	FALSE		FALSE	TRUE	32	VELLORE	9E+09			2	1	1	0	12	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE
156		######	SATHYA	9635255	FALSE		FALSE	TRUE	32	VELLORE	9E+09			2	1	1	0	20	TRUE	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE
157		######	SASIKA	4721029	FALSE		FALSE	TRUE	28	TIRUVAL	9E+09			3	1	1	1	22	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
158		######	NEELIM	9307729	FALSE		FALSE	TRUE	35	ANDHRA	9E+09	7	2	3	2	1	0	16	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE
159		######	FOUZIY	7735294	FALSE		FALSE	TRUE	26	TIRUPA	9E+09	7	4	1	0	0	0	20	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
160		######	PRAVEE	2042000	FALSE		FALSE	TRUE	31	ARIYMB	9E+09			1	0	0	0	14	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
161		######	NASRIN	7490019	FALSE		FALSE	TRUE	25	VELLORE	9E+09	7	6	4	2	1	1	16	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
162		######	YUVAYA	4502419	FALSE		FALSE	TRUE	34	VELLORE	9E+09			5	2	0	2	8	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	TRUE		TRUE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE
163		######	DIVYAM	7703546	FALSE		FALSE	TRUE	25	CHITTOO	9E+09			1	0	0	0	23	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
164		######	MAHALI	7397771	FALSE		FALSE	TRUE	33	VALAJA	9E+09			3	2	2	0	24	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
165		######	SANTEEP	7429895	FALSE		FALSE	TRUE	21	VALAJA	9E+09			1	0	0	0	16	TRUE	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
166		######	AMUTHA	7624764	FALSE		FALSE	TRUE	21	VALAJA	9E+09			1	0	0	0	16	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
167		######	GEETHA	6258936	FALSE		FALSE	TRUE	27	CHITTOO	9E+09			3	0	0	2	13	TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
168		######	SANJAY	8838946	FALSE		FALSE	TRUE	31	VAYANA	9E+09	2	1	2	1	1	0	22	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
169		######	PRIYAD	5359477	FALSE		FALSE	TRUE	26	VELLORE	9E+09				0	0	0	34	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	WSTIBI	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
170		######	REVATH	2239419	FALSE		FALSE	TRUE	22	VELLORE	9E+09			2	1	1	0	19	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
171		######	YASMEE	9240019	FALSE		FALSE	TRUE	28	KASPA	9E+09	7	2	3	2	1	0	30	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
172		######	SIMASA	2059671	FALSE		FALSE	TRUE	28	VELLORE				2	0	0	1	19	TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE
173		######	DHANAM	7624071	FALSE		FALSE	TRUE	30	VALAJA	9E+09			2	1	0	0	19	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	TRUE		FALSE	FALSE		FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE
174		######	BUVANE	7623859	FALSE		FALSE	TRUE	28	TIRUVAL	9E+09			1	0	0	0	12	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE	FALSE		2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	GRANTC	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
175		######	BHARAV	7746427	FALSE		FALSE	TRUE	24	TIRUVAL	9E+09				0	0	0	8	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	TRUE		FALSE	FALSE		2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
176		######	GAYATH	3913400	FALSE		FALSE	TRUE	24	GUDIYA	9E+09			3	1	1	1	28	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
177		######	DHANAS	9957699	FALSE		FALSE	TRUE	23	KATPAA	9E+09	7	6	1	0	0	0	12	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
178		######	LALITH	4635714	FALSE		FALSE	TRUE	25	KATPAA	9E+09			1	0	0	0	20	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE	FALSE		1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
179		######	RENUKA	2200376	FALSE		FALSE	TRUE	31	KATPAA	9E+09			2	1	0	0	20	TRUE	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE
180		######	MOTTAI	3044994	FALSE		FALSE	TRUE	24	TIRUVAL	9E+09			3	1	1	1	36	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
181		######	LAKSHM	7095700	FALSE		FALSE	TRUE	21	TIRUVAL	9E+09	7	5	2	0	0	1	35	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
182		######	MANJU	9996067	FALSE		FALSE	TRUE	26	KATPAA	9E+09			2	1	1	0	12	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE		FALSE	FALSE		1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE
183		######	SIVARA	7403967	FALSE		FALSE	TRUE	31	CHITTOO	9E+09	7	2	3	2	1	0	14	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	TRUE		FALSE	FALSE		1	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	TRUE	FALSE	FALSE	TRUE	FALSE
184		######	ALIYAA	7457762	FALSE		FALSE	TRUE	18	GUDIYA	9E+09			1	0	0	0	20	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	TRUE		FALSE	FALSE		1	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
185		######	PARIMA	7672838	FALSE		FALSE	TRUE	32	TIRUPA	9E+09			2	1	1	0	12	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
186		######	DIVYAB	7096927	FALSE		FALSE	TRUE	20	TIRUVAL	9E+09			1	0	0	0	24	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
187		######	PRABA	3345495	FALSE		FALSE	TRUE	27	VALAJA	9E+09			5	2	2	2	20	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE
188		######	DIVYA	9159637	FALSE		FALSE	TRUE	18	KATPAA	9E+09	7	6	3	1	1	1		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE

	AT	AU	AV	AW	AX	AY	AZ	BA	BB	BC	BD	BE	BF	BG	BH	BI	BJ	BK	BL	BM	BN	BO	BP	BQ	BR	BS	BT	BU	BV	BW	BX	BY	BZ	CA	CB	CC	CD	CE	CF	CG	CH	CI	CJ	CK	CL
145	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	TRUE	ACUTE\	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	TRUE	TRUE	FSSG,O
146	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	ANASM	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	PEDAL(
147	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	SWELLI
148	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	SLE
149	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
150	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	DARKE?
151	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	HBA+A?
152	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	CHEST?
153	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH,
154	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
155	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH,
156	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH
157	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
158	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
159	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	THROAT
160	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
161	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	BACKP
162	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	OYTIN?
163	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH,
164	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
165	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH,
166	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH
167	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH
168	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH,
169	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	THROM
170	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	BREATH
171	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALLS\
172	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	COUGH,
173	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	SUDOR?	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TINGLIN
174	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
175	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	CONDIA	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE	FALSE	
176	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	GRAVES
177	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
178	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH
179	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	CHEST?
180	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	LEANED
181	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	BABY-C	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	L4+Ja
182	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	NUMBN
183	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH
184	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH
185	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	IUD	FALSE	FALSE	TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
186	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
187	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	BREATH
188	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	AMBIGC	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH
189	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	MYP-DS	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	BREATH
190	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	OPTHM

	CM	CN	CO	CP	CQ	CR	CS	CT	CU	CV	CW	CX	CY	CZ	DA	DB	DC	DD	DE	DF	DG	DH	DI	DJ	DK	DL	DM	DN	DO	DP	DQ	DR	DS	DT	DU	DV	DW	DX	DY	DZ	EA	EB	EC	ED	EE
144		1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE
145		4	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ARTERH	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE
146		3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE
147		3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	COLOST	FALSE	FALSE	FALSE
148		4	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	SLE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE
149		4	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE
150		3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE
151		4	TRUE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE
152		2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE
153		1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE
154		2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE
155		1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE
156		1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE
157		3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE
158		3	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE
159		1	TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE
160		4	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE
161		3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE
162	003		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	CYTIN2	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE
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164		4	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	TRUE
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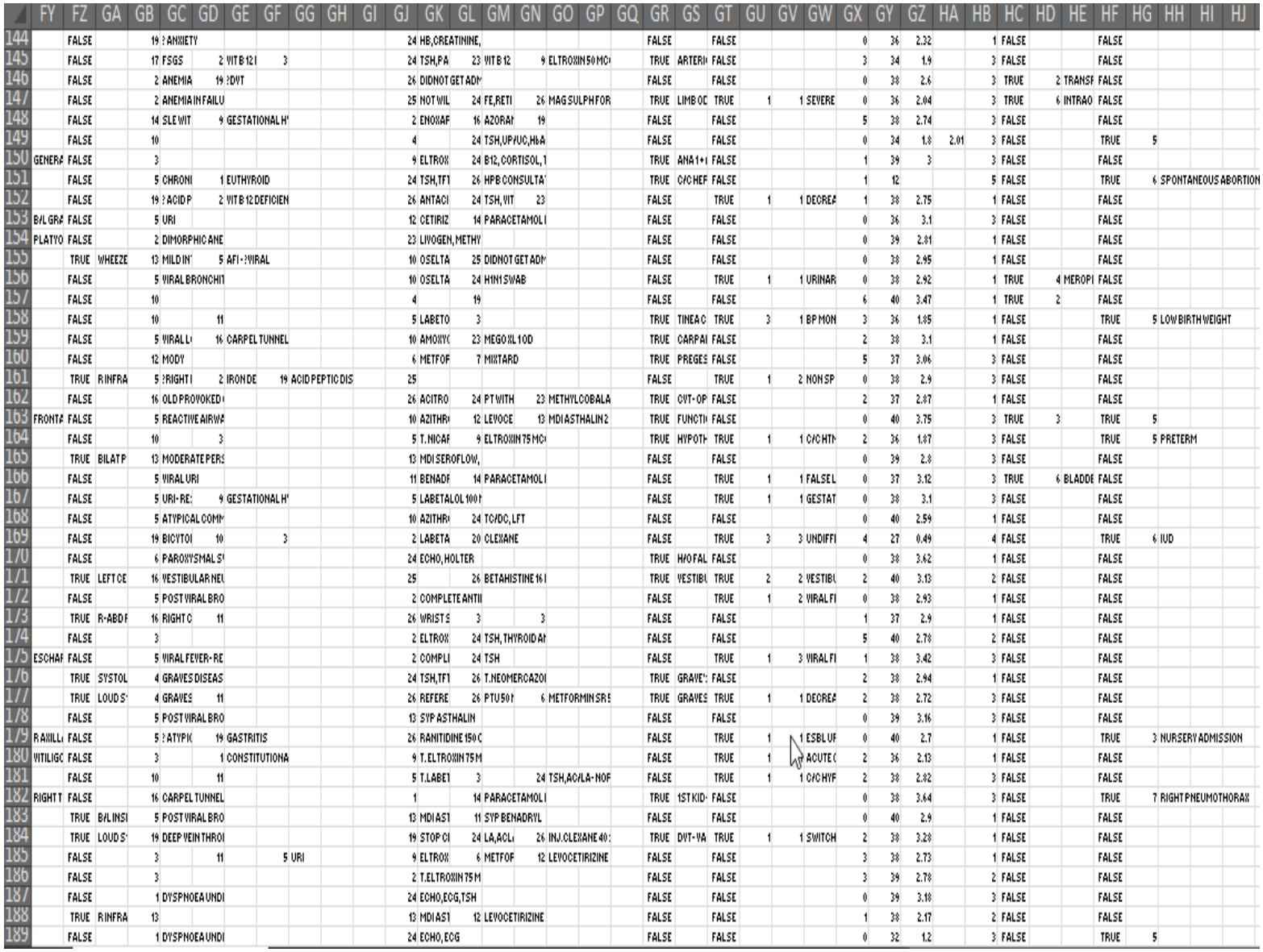

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144		FALSE		19	? ANXIETY							24	HB,CREATININE,							FALSE		FALSE				0	36	2.32		1	FALSE			FALSE				
145		FALSE		17	FSGS	2	VIT B 12 I	3				24	TSH,PA	23	VIT B 12	9	ELTROXIN 50 MC			TRUE	ARTERI	FALSE				3	34	1.9		3	FALSE			FALSE				
146		FALSE		2	ANEMIA	19	?DVT					26	DIDNOT GET ADM							FALSE		FALSE				0	38	2.6		3	TRUE	2	TRANSF	FALSE				
147		FALSE		2	ANEMIA IN FAILU							25	NOT WIL	24	FE,RETI	26	MAG SULPH FOR			TRUE	LIMB OE	TRUE	1	1	SEVERE	0	36	2.04		3	TRUE	6	INTRAO	FALSE				
148		FALSE		14	SLE WIT	9	GESTATIONAL H'					2	ENOXAF	16	AZORAI	19				FALSE		FALSE				5	38	2.74		3	FALSE			FALSE				
149		FALSE		10								4		24	TSH,UP/UC,HbA					FALSE		FALSE				0	34	1.8	2.01	3	FALSE			TRUE	5			
150	GENERA	FALSE		3								9	ELTROX	24	B12, CORTISOL, T					TRUE	ANA1+	FALSE				1	39	3		3	FALSE			FALSE				
151		FALSE		5	CHRONI	1	EUTHYROID					24	TSH,TF1	26	HPB CONSULTA'					TRUE	C/C HEF	FALSE				1	12			5	FALSE			TRUE	6	SPONTANEOUS ABORTION		
152		FALSE		19	? ACID P	2	VIT B 12 DEFICIEN					26	ANTACI	24	TSH, VIT	23				FALSE		TRUE	1	1	DECREA	1	38	2.75		1	FALSE			FALSE				
153	B/L GRA	FALSE		5	URI							12	CETIRIZ	14	PARACETAMOL I					FALSE		FALSE				0	36	3.1		3	FALSE			FALSE				
154	PLATYO	FALSE		2	DIMORPHIC ANE							23	LIVOGEN, METHY							FALSE		FALSE				0	39	2.81		1	FALSE			FALSE				
155		TRUE	WHEEZE	13	MILD IN'	5	AFI - ?VIRAL					10	OSELTA	25	DIDNOT GET ADM					FALSE		FALSE				0	38	2.95		1	FALSE			FALSE				
156		FALSE		5	VIRAL BRONCHIT							10	OSELTA	24	H1N1 SWAB					FALSE		TRUE	1	1	URINAR	0	38	2.92		1	TRUE	4	MEROPI	FALSE				
157		FALSE		10								4		19						FALSE		FALSE				6	40	3.47		1	TRUE	2		FALSE				
158		FALSE		10		11						5	LABETO	3						TRUE	TINEA C	TRUE	3	1	BP MON	3	36	1.85		1	FALSE			TRUE	5	LOW BIRTH WEIGHT		
159		FALSE		5	VIRAL L	16	CARPEL TUNNEL					10	AMOXYC	23	MEGO XL 10 D					TRUE	CARPAI	FALSE				2	38	3.1		1	FALSE			FALSE				
160		FALSE		12	MODY							6	METFOF	7	MIXTARD					TRUE	PREGES	FALSE				5	37	3.06		3	FALSE			FALSE				
161		TRUE	R INFRA	5	?RIGHT I	2	IRON DE	19	ACID PEPTIC DIS			25								FALSE		TRUE	1	2	NON SP	0	38	2.9		3	FALSE			FALSE				
162		FALSE		16	OLD PROVOKED							26	ACITRO	24	PT WITH	23	METHYLCOBALA			TRUE	CVT - OP	FALSE				2	37	2.87		1	FALSE			FALSE				
163	FRONTA	FALSE		5	REACTIVE AIRWA							10	AZITHR	12	LEVOCE	13	MDI ASTHALIN 2			TRUE	FUNCTI	FALSE				0	40	3.75		3	TRUE	3		TRUE	5			
164		FALSE		10		3						5	T. NICAF	9	ELTROXIN 75 MC					TRUE	HYPOTH	TRUE	1	1	C/C HTN	2	36	1.87		3	FALSE			TRUE	5	PRETERM		
165		TRUE	BILAT P	13	MODERATE PERS							13	MDI SEROFLOW,							FALSE		FALSE				0	39	2.8		3	FALSE			FALSE				
166		FALSE		5	VIRAL URI							11	BENADF	14	PARACETAMOL I					FALSE		TRUE	1	1	FALSE L	0	37	3.12		3	TRUE	6	BLADDE	FALSE				
167		FALSE		5	URI - RE:	9	GESTATIONAL H'					5	LABETALOL 100 I							FALSE		TRUE	1	1	GESTAT	0	38	3.1		3	FALSE			FALSE				
168		FALSE		5	ATYPICAL COMM							10	AZITHR	24	TC/DC, LFT					FALSE		FALSE				0	40	2.59		1	FALSE			FALSE				
169		FALSE		19	BICYTOI	10		3				2	LABETA	20	CLEXANE					FALSE		TRUE	3	3	UNDIFFI	4	27	0.49		4	FALSE			TRUE	6	IUD		
170		FALSE		6	PAROXYSMAL S'							24	ECHO, HOLTER							TRUE	H/O FAL	FALSE				0	38	3.62		1	FALSE			FALSE				
171		TRUE	LEFT CE	16	VESTIBULAR NEU							25		26	BETAHISTINE 16 I					TRUE	VESTIBU	TRUE	2	2	VESTIBU	2	40	3.13		2	FALSE			FALSE				
172		FALSE		5	POST VIRAL BRO							2	COMPLETE ANTII							FALSE		TRUE	1	2	VIRAL FI	0	38	2.93		1	FALSE			FALSE				
173		TRUE	R-ABD P	16	RIGHT C	11						26	WRIST S	3		3				FALSE		FALSE				1	37	2.9		1	FALSE			FALSE				
174		FALSE		3								2	ELTROX	24	TSH, THYROID AI					FALSE		FALSE				5	40	2.78		2	FALSE			FALSE				
175	ESCHAF	FALSE		5	VIRAL FEVER - RE							2	COMPLI	24	TSH					FALSE		TRUE	1	3	VIRAL FI	1	38	3.42		3	FALSE			FALSE				
176		TRUE	SYSTOL	4	GRAVES DISEAS							24	TSH,TF1	26	T.NEOMERCAZOI					TRUE	GRAVE'	FALSE				2	38	2.94		1	FALSE			FALSE				
177		TRUE	LOUD S'	4	GRAVES	11						26	REFERE	26	PTU 50 I	6	METFORMIN SR 5			TRUE	GRAVES	TRUE	1	1	DECREA	2	38	2.72		3	FALSE			FALSE				
178		FALSE		5	POST VIRAL BRO							13	SYP ASTHALIN							FALSE		FALSE				0	39	3.16		3	FALSE			FALSE				
179	RAHILL	FALSE		5	? ATYPI(	19	GASTRITIS					26	RANITIDINE 150 C							FALSE		TRUE	1	1	ESBL UF	0	40	2.7		1	FALSE			TRUE	3	NURSERY ADMISSION		
180	VITILIGC	FALSE		3		1	CONSTITUTIONA					9	T. ELTROXIN 75 M							FALSE		TRUE	1	1	ACUTE (	2	36	2.13		1	FALSE			FALSE				
181		FALSE		10		11						5	T. LABE1	3		24	TSH, AC/LA - NOF			FALSE		TRUE	1	1	C/C HYF	2	38	2.82		3	FALSE			FALSE				
182	RIGHT T	FALSE		16	CARPEL TUNNEL							1		14	PARACETAMOL I					TRUE	1ST KID'	FALSE				0	38	3.64		3	FALSE			TRUE	7	RIGHT PNEUMOTHORAX		
183		TRUE	B/L INSI	5	POST VIRAL BRO							13	MDI AS1	11	SYP BENADRYL					FALSE		FALSE				0	40	2.9		1	FALSE			FALSE				
184		TRUE	LOUD S'	19	DEEP VEIN THRO							19	STOP CI	24	LA, ACL	26	INJ. CLEXANE 40 :			TRUE	DVT - VA	TRUE	1	1	SWITCH	2	38	3.28		1	FALSE			FALSE				
185		FALSE		3		11		5	URI			9	ELTROX	6	METFOF	12	LEVOCETIRIZINE			FALSE		FALSE				3	38	2.73		1	FALSE			FALSE				
186		FALSE		3								2	T. ELTROXIN 75 M							FALSE		FALSE				3	39	2.78		2	FALSE			FALSE				
187		FALSE		1	DYSPNOEA UNDI							24	ECHO, ECG, TSH							FALSE		FALSE				0	39	3.18		3	FALSE			FALSE				
188		TRUE	R INFRA	13								13	MDI AS1	12	LEVOCETIRIZINE					FALSE		FALSE				1	38	2.17		2	FALSE			FALSE				
189		FALSE		1	DYSPNOEA UNDI							24	ECHO, ECG							FALSE		FALSE				0	32	1.2		3	FALSE			TRUE	5			

	AT	AU	AV	AW	AX	AY	AZ	BA	BB	BC	BD	BE	BF	BG	BH	BI	BJ	BK	BL	BM	BN	BO	BP	BQ	BR	BS	BT	BU	BV	BW	BX	BY	BZ	CA	CB	CC	CD	CE	CF	CG	CH	CI	CJ	CK	CL
189	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	AMBIGC	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	BREATH
190	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	TRUE	MTP-DE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	OPTIMIS
191	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
192	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	SNEEZIN
193	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	SEIZURI
194	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	CYANOT	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	BREATH
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199	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
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203	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
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205	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
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211	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
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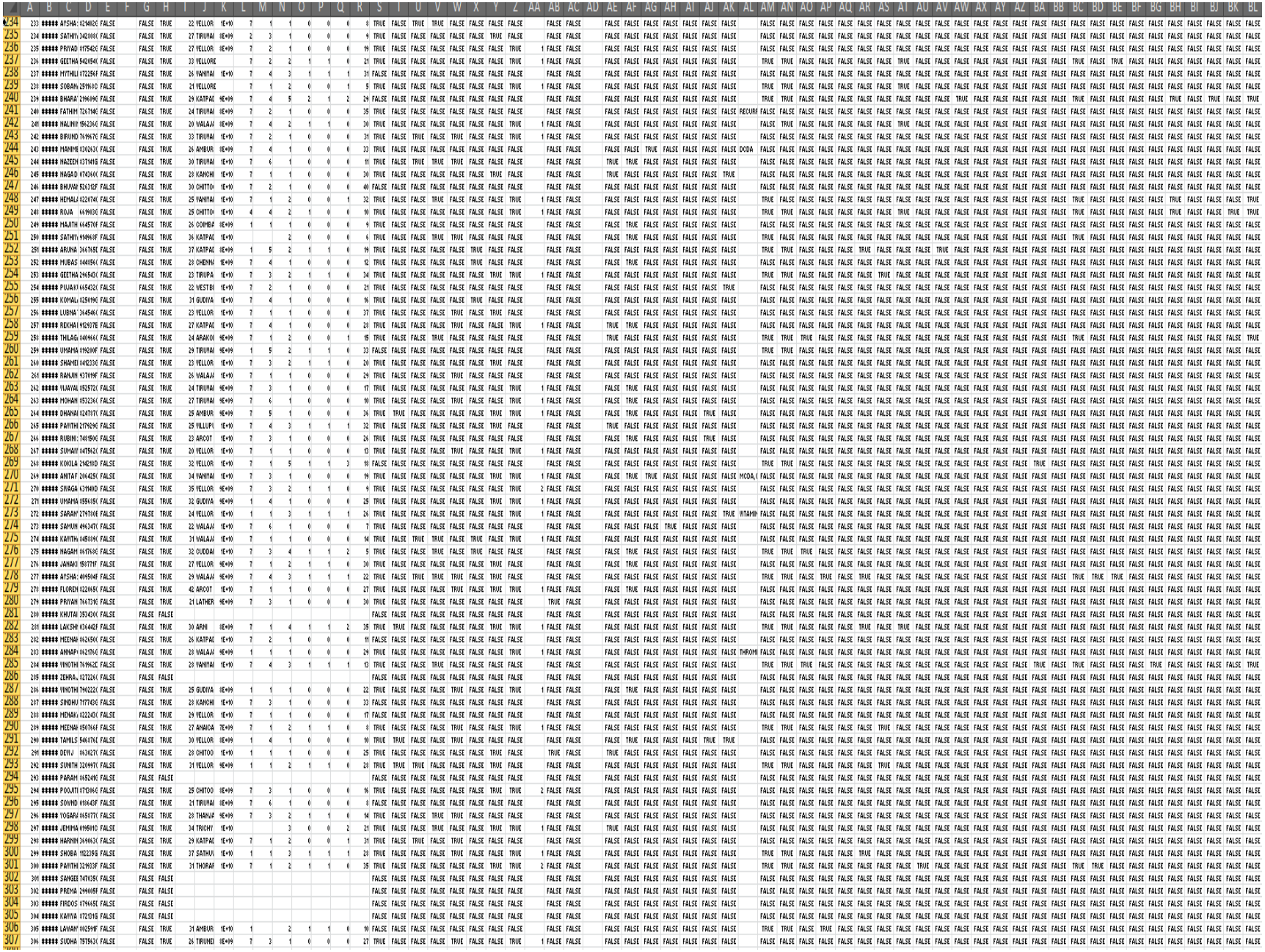
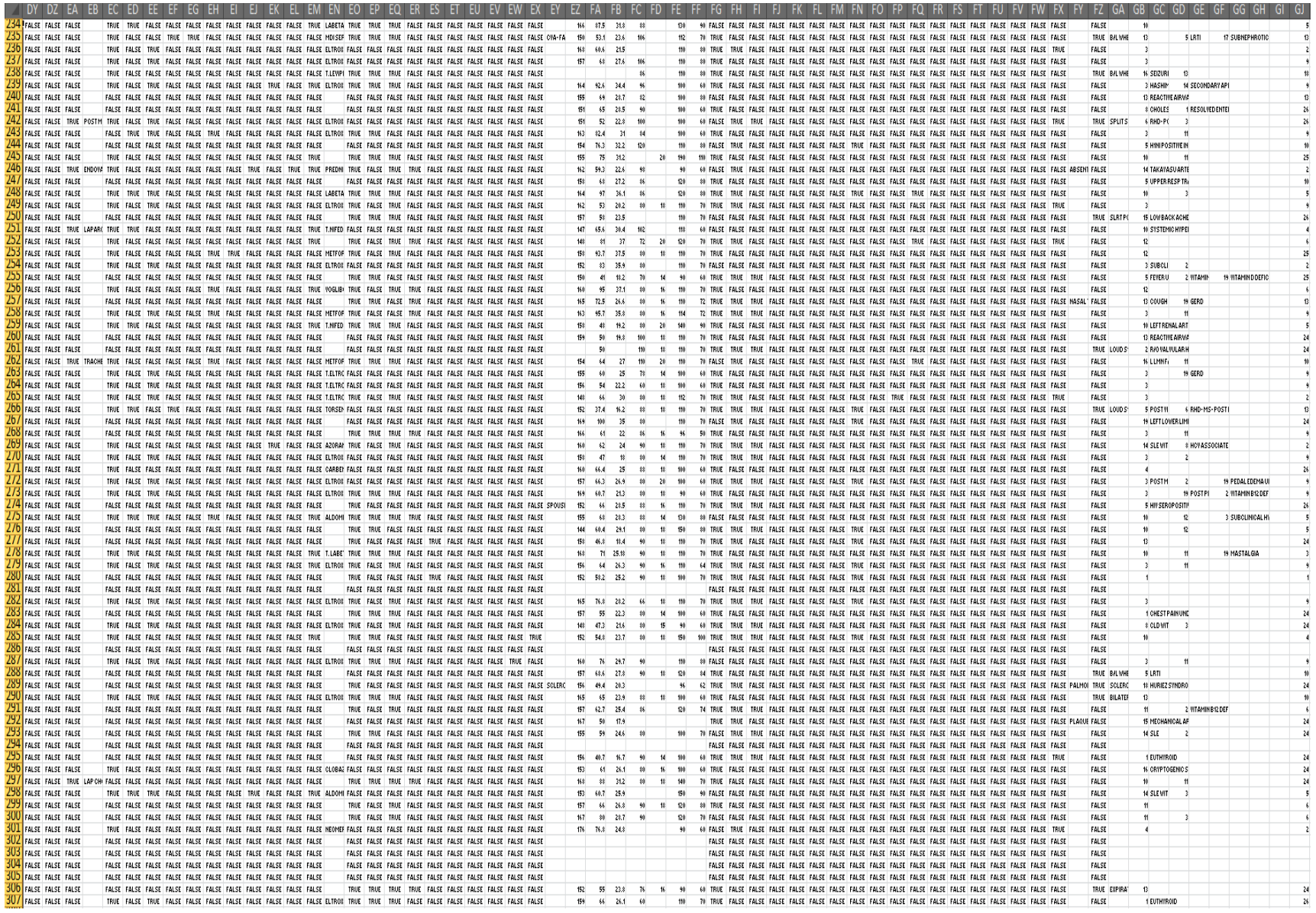
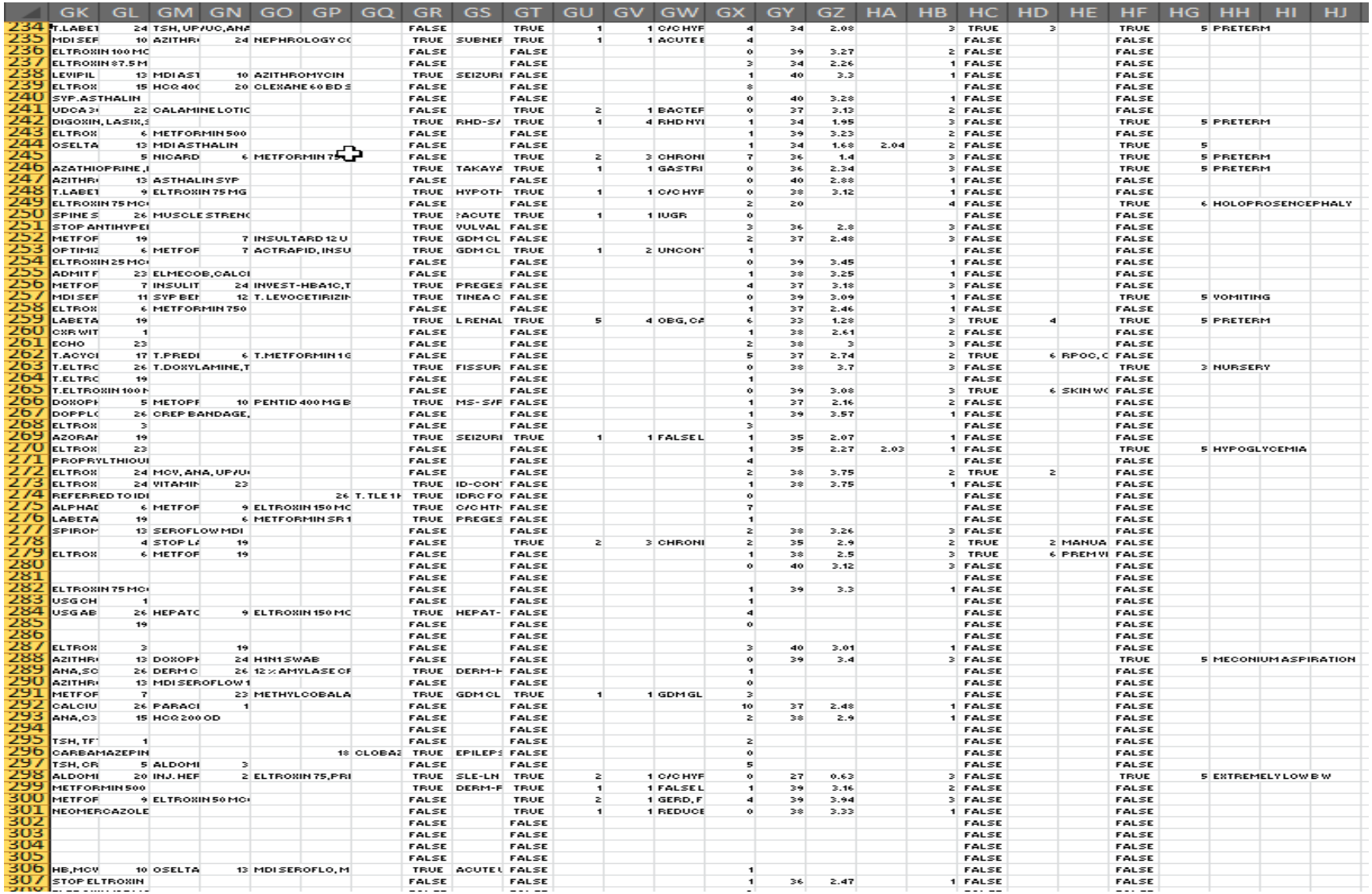
213	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
214	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
215	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
216	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
217	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
218	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
219	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
220	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	VOMITIN
221	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	IUD	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	LOOSES
222	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH,
223	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
224	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
225	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
226	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH
227	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	RECENT
228	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ABOVA	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
229	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
230	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
231	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
232	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	PEDAL(
233	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	
234	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	

	CM	CN	CO	CP	CQ	CR	CS	CT	CU	CV	CW	CX	CY	CZ	DA	DB	DC	DD	DE	DF	DG	DH	DI	DJ	DK	DL	DM	DN	DO	DP	DQ	DR	DS	DT	DU	DV	DW	DX	DY	DZ	EA	EB	EC	ED	EE
189	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
190	4	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	DSH+P+	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE
191	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
192	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE
193	4	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE
194	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
195	3	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	BENIGN	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
196	4	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	TRUE
197	1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE
198	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	TRUE
199	4	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	SLE,CU	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE
200	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE	FALSE
201	1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE
202	1	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
203	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
204	1	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE
205	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
206	1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
207	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
208	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
209	3	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	TRUE	TRUE
210	3	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	TRUE
211	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
212	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
213	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
214	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
215	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
216	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE
217	4	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	TRUE	FALSE
218	2	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	PLEURA+	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
219	1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
220	1	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	OTOSCI	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	R.TYMP+	FALSE	FALSE	FALSE
221	1	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
222	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
223	4	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
224	3	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE
225	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	TRUE
226	3	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
227	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
228	1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
229	3	TRUE	TRUE	TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	TRUE
230	2	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE
231	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	TRUE
232	2	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	L.PYELO	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TYMP-AV	FALSE	FALSE	FALSE
233	4	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE
234	1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE

	FY	FZ	GA	GB	GC	GD	GE	GF	GG	GH	GI	GJ	GK	GL	GM	GN	GO	GP	GQ	GR	GS	GT	GU	GV	GW	GX	GY	GZ	HA	HB	HC	HD	HE	HF	HG	HH	HI	HJ
189		FALSE		1 DYSPNOEA,NOI									24 ECHO,ECG							FALSE		FALSE				0	32	1.2		3	FALSE			TRUE	5		
190		FALSE		16 SEIZUREDISORE									18 LEVIPIL	14 PARACI		24 LEVIPILASSAY				FALSE		FALSE									FALSE			FALSE			
191		TRUE	ESM,ED	6 COARCTATION O									25 DIAGNOSED ANC							TRUE	COARC	TRUE	2	3 COARC	0	11			4	FALSE			TRUE	6 MTP,ABORTUS		
192		FALSE		19 ALLERGIC RHINI									12 FLEXANASE NAS							FALSE		FALSE				0					FALSE			FALSE			
193		FALSE		16 SEIZUREDISORE									2 T.PHENOBARBIT							FALSE		FALSE				0					FALSE			FALSE			
194		TRUE	SYSTOL	1 FLOW MURMUR,I									1							FALSE		FALSE				0	38	3.2		1	FALSE			FALSE			
195		TRUE	SUCCU	19 BENIGN	3 SUBCLINICAL HY								24 TSH,TF1	26 GJ ADVISED-PA						TRUE	GOO/SL	FALSE				0					FALSE			FALSE			
196		FALSE		3	2 VIT B 12 DEFICIEN								24 IRON,B1	9 ELTROI		23 METHYLCOBALA				FALSE		FALSE				4	37	2.18		2	FALSE			FALSE			
197		FALSE		14 APLASI	10								4	19		24 CREATININE,TSH				FALSE		TRUE	1	1 INITIATI	0	36	2.48		3	FALSE			FALSE			
198		FALSE		2 VIT B 12 I	3								23 AUTRIN	2 ELTROXIN 100 MC						TRUE	HYPOTI	TRUE	1	1 ANAEMI	0	37	2.58		3	FALSE			FALSE			
199		FALSE		14 SLE WITH CLASS									15 HCQ 400	17 PREDNI		2 AZATHIOPRINE 1				TRUE	SLE,GL	FALSE				3	31	2		1	FALSE			TRUE	3		
200		FALSE		10									4	19		24 CREATININE,TSH				FALSE		FALSE				1	38	2.84		1	FALSE			FALSE			
201		FALSE		9 GESTATIONAL HY									4	2						FALSE		FALSE				1	38	3.03		1	FALSE			FALSE			
202		TRUE	LOUD S	1									24 ECHO,E	1						FALSE		FALSE				1	39	2.81		1	FALSE			FALSE			
203		FALSE		11									6 METFOF	19						TRUE	DYSPNE	FALSE				1	36	2.4		3	FALSE			FALSE			
204		FALSE		5 VIRAL INFECTION									10 T.AZITH	13 MDI SEF		24 HINI SWAB				FALSE		FALSE				0	36	2.4		1	FALSE			FALSE			
205		FALSE		11	9								3	4						FALSE		FALSE				0	39	3.08		3	FALSE			FALSE			
206		FALSE		5 RESOLVING TRA									26 STEAM INHALAT							FALSE		TRUE	1	1 SEVERE	0	39	2.42		3	FALSE			FALSE			
207		TRUE	R.CARO	14 TAKAYA	10								25 FOREVE	5 LABETO	17					TRUE	TAKAYA	TRUE	2	3 TAKAYA	1	13			4	FALSE			TRUE	6		
208		FALSE		10									4	19						FALSE		TRUE	1	1 O/O HYP	4	37	2.97		1	FALSE			FALSE			
209		FALSE		12	10	3							2 METFOF	7 ACTRAI		5 LABETALOL 100 I				TRUE	GDM-EI	FALSE				3					FALSE			FALSE			
210		FALSE		10	3								5 LABETO	2 T.ELTRO	19					FALSE		FALSE				5	38	2.65		1	FALSE			FALSE			
211		FALSE		1	5 URI								1	26 SALINE GARGLE,						FALSE		FALSE				1	39	2.95		1	FALSE			FALSE			
212		FALSE		10									4							FALSE		TRUE	1	1 O/O HYP	0	38	3.41		1	FALSE			FALSE			
213		FALSE		1 BREATHLESSNE									24 HB,EOG,ECHO							FALSE		TRUE	1	1 ACUTE (	0	40	3.3		3	FALSE			FALSE			
214		FALSE		1									1							FALSE		TRUE	1	1 FALSE L	0	38	2.51		2	FALSE			FALSE			
215		FALSE		14 INFLAMMATORY									24 RF,ANTICCP,SS							FALSE		FALSE				1					FALSE			FALSE			
216		FALSE		8 HBV CARRIER									24 LFT,EAF	26 SPOUSE TESTIN						FALSE		FALSE				1	37	3		1	FALSE			FALSE			
217		FALSE		3									24 TSH,TF	2 ELTROXIN 75 MC						TRUE	HYPOTI	FALSE				2	39	2.92		3	TRUE		2 PERIPA	FALSE			
218		TRUE	B/L RHC	13 COUGH VARIANT									10 AZITHRI	13 MDI SEF		26 ANTACIDS				FALSE		FALSE				1	39	3.34		1	FALSE			FALSE			
219		FALSE		2 IRON DEFICIENC									23 AUTRIN	26 T.ALBENDAZOLE						FALSE		FALSE				1	39	2.62		1	FALSE			FALSE			
220		FALSE		19 MORNING SICKN									26 T.DOMINATE 10 M							TRUE	OTOSCL	FALSE				0					FALSE			FALSE			
221	DEHYDF	FALSE		19 ACUTE GASTROE									26 ORS	10 AZITHRI		24 RECHECK ECHO,				TRUE	PULMA	TRUE	1	2 PULMOI	0	39	2.49		1	FALSE			FALSE			
222		TRUE	LOCALI	5 URI	19 ACID PEPTIC DIS								11 SYP.BE	26 ANTACIDS						FALSE		FALSE				0	38	3.5		1	FALSE			FALSE			
223		FALSE		3									24 TSH,TF1	9 ELTROXIN 25 MC						TRUE	PUPPP	FALSE				1	39	3.36		2	FALSE			FALSE			
224		FALSE		16 SEIZUREDISORE									18 CBZ 200	24 S.CARE		26 EPILEPSY CLINIC				FALSE		FALSE				2					FALSE			FALSE			
225		FALSE		3									2 T.ELTROXIN 50 M							FALSE		FALSE				0					FALSE			FALSE			
226		TRUE	B/L WHE	13									13 MDI SEROFLO,MI							FALSE		FALSE				0	39	2.53		1	TRUE		4 KLEBSII	FALSE			
227		FALSE		5 UNDIFFERENTIA									24 WIDAL,I	1 REPORTS-NORI						FALSE		FALSE				1					FALSE			FALSE			
228		FALSE		10									5 ALPHAI	19		24 URINE R/E,CREA				FALSE		FALSE				2	19			4	FALSE			TRUE	6 PPROM,hence termina		
229		FALSE		10 HYPERT	12 UTI	3							25 METFOF	5 T.LABET		9 T.ELTROXIN 50 M				FALSE		TRUE	2	2 HYPERT	12	37	2.48		3	TRUE	6 URI		FALSE			
230		FALSE		10									5 LABETO	19		24 TSH,SE,RENAL D				FALSE		TRUE	1	1 O/O HYP	2	32	1.6		3	FALSE			TRUE	5		
231		FALSE		9 GESTAT	3	11							5 LABETA	9 ELTROI		6 METFORMIN SR E				FALSE		FALSE				1	36	2.7		3	FALSE			TRUE	5		
232		FALSE		17 ACUTE F	18 PAPULA	2 IRON DEFICIENC							25	10 PIPTAZ		26 FLUTIVATE CREA				TRUE	PAPULA	TRUE	3	3 ACUTE F	2	36	2.74		3	FALSE			TRUE	5 PRETERM		
233		FALSE		10	11								5 NICARD	19		6 METFORMIN 250				FALSE		TRUE	1	1 O/O HYP	1	34	2.12		1	FALSE			TRUE	5 PRETERM		
234		FALSE		10									5 T.LABET	24 TSH,UP/UD,ANI						FALSE		TRUE	1	1 O/O HYP	4	34	2.08		3	TRUE	3		TRUE	5 PRETERM		







	GK	GL	GM	GN	GO	GP	GQ	GR	GS	GT	GU	GV	GW	GX	GY	GZ	HA	HB	HC	HD	HE	HF	HG	HH	HI	HJ
234	T.LABET	24	TSH, UP/UC,ANA					FALSE		TRUE	1	1	C/C HYF	4	34	2.08		3	TRUE	3		TRUE	5	PRETERM		
235	MDI SEF	10	AZITHR	24	NEPHROLOGY CO			TRUE	SUBNEF	TRUE	1	1	ACUTE E	4					FALSE			FALSE				
236	ELTROXIN 100 MC							FALSE		FALSE				0	39	3.27		2	FALSE			FALSE				
237	ELTROXIN 87.5 M							FALSE		FALSE				3	34	2.26		1	FALSE			FALSE				
238	LEVIPIL	13	MDI AST	10	AZITHROMYCIN			TRUE	SEIZURI	FALSE				1	40	3.3		1	FALSE			FALSE				
239	ELTROX	15	HCQ 400	20	CLEXANE 60 BD S			FALSE		FALSE				8					FALSE			FALSE				
240	SYP.ASTHALIN							FALSE		FALSE				0	40	3.28		1	FALSE			FALSE				
241	UDCA 3	22	CALAMINE LOTIC					FALSE		TRUE	2	1	BACTEF	0	37	3.13		2	FALSE			FALSE				
242	DIGOXIN, LASIX,							TRUE	RHD-SA	TRUE	1	4	RHD NYI	1	34	1.95		3	FALSE			TRUE	5	PRETERM		
243	ELTROX	6	METFORMIN 500					FALSE		FALSE				1	39	3.23		2	FALSE			FALSE				
244	OSELTA	13	MDI ASTHALIN					FALSE		FALSE				1	34	1.68	2.04	2	FALSE			TRUE	5			
245		5	NICARD	6	METFORMIN 75			FALSE		TRUE	2	3	CHRONI	7	36	1.4		3	FALSE			TRUE	5	PRETERM		
246	AZATHIOPRINE, I							TRUE	TAKAYA	TRUE	1	1	GASTRI	0	36	2.34		3	FALSE			TRUE	5	PRETERM		
247	AZITHR	13	ASTHALIN SYP					FALSE		FALSE				0	40	2.88		1	FALSE			FALSE				
248	T.LABET	9	ELTROXIN 75 MG					TRUE	HYPOTH	TRUE	1	1	C/C HYF	0	38	3.12		1	FALSE			FALSE				
249	ELTROXIN 75 MC							FALSE		FALSE				2	20			4	FALSE			TRUE	6	HOLOPROSENCEPHALY		
250	SPINE S	26	MUSCLE STRENG					TRUE	ACUTE	TRUE	1	1	IUGR	0					FALSE			FALSE				
251	STOP ANTIHYPEI							TRUE	VULVAL	FALSE				3	36	2.8		3	FALSE			FALSE				
252	METFOF	19		7	INSULTARD 12 U			TRUE	GDM CL	FALSE				2	37	2.48		3	FALSE			FALSE				
253	OPTIMIZ	6	METFOF	7	ACTRAPID, INSU			TRUE	GDM CL	TRUE	1	2	UNCONT	1					FALSE			FALSE				
254	ELTROXIN 25 MC							FALSE		FALSE				0	39	3.45		1	FALSE			FALSE				
255	ADMIT F	23	ELMECOB,CALCI					FALSE		FALSE				1	38	3.25		1	FALSE			FALSE				
256	METFOF	7	INSULIT	24	INVEST-HBA1C,T			TRUE	PREGES	FALSE				4	37	3.18		3	FALSE			FALSE				
257	MDI SEF	11	SYP BEI	12	T. LEVOCETIRIZIN			TRUE	TINEA C	FALSE				0	39	3.09		1	FALSE			TRUE	5	VOMITING		
258	ELTROX	6	METFORMIN 750					FALSE		FALSE				1	37	2.46		1	FALSE			FALSE				
259	LABETA	19						TRUE	L RENAL	TRUE	5	4	OBG, CA	6	33	1.28		3	TRUE	4		TRUE	5	PRETERM		
260	CXR WIT	1						FALSE		FALSE				1	38	2.61		2	FALSE			FALSE				
261	ECHO	23						FALSE		FALSE				2	38	3		3	FALSE			FALSE				
262	T.ACYCI	17	T.PREDI	6	T.METFORMIN 1 G			FALSE		FALSE				5	37	2.74		2	TRUE	6	RPOC, C	FALSE				
263	T.ELTRO	26	T.DOXYLAMINE,T					TRUE	FISSUR	FALSE				0	38	3.7		3	FALSE			TRUE	3	NURSERY		
264	T.ELTRO	19						FALSE		FALSE				1					FALSE			FALSE				
265	T.ELTROXIN 100 M							FALSE		FALSE				0	39	3.08		3	TRUE	6	SKIN WC	FALSE				
266	DOXOPH	5	METOPF	10	PENTID 400 MG B			TRUE	MS-SYF	FALSE				1	37	2.16		2	FALSE			FALSE				
267	DOPPLC	26	CREP BANDAGE,					FALSE		FALSE				1	39	3.57		1	FALSE			FALSE				
268	ELTROX	3						FALSE		FALSE				3					FALSE			FALSE				
269	AZORAI	19						TRUE	SEIZURI	TRUE	1	1	FALSE L	1	35	2.07		1	FALSE			FALSE				
270	ELTROX	23						FALSE		FALSE				1	35	2.27	2.03	1	FALSE			TRUE	5	HYPOGLYCEMIA		
271	PROPRYLTHIOUI							FALSE		FALSE				4					FALSE			FALSE				
272	ELTROX	24	MCV, ANA, UP/UC					FALSE		FALSE				2	38	3.75		2	TRUE	2		FALSE				
273	ELTROX	24	VITAMIN	23				TRUE	ID-CONT	FALSE				1	38	3.75		1	FALSE			FALSE				
274	REFERRED TO IDI						26	T. TLE 1 H	IDRC FO	TRUE				0					FALSE			FALSE				
275	ALPHAC	6	METFOF	9	ELTROXIN 150 MC			TRUE	C/C HTN	FALSE				7					FALSE			FALSE				
276	LABETA	19		6	METFORMIN SR 1			TRUE	PREGES	FALSE				1					FALSE			FALSE				
277	SPIROM	13	SEROFLOW MDI					FALSE		FALSE				2	38	3.26		3	FALSE			FALSE				
278		4	STOP LA	19				FALSE		TRUE	2	3	CHRONI	2	35	2.9		2	TRUE	2	MANUA	FALSE				
279	ELTROX	6	METFOF	19				FALSE		FALSE				1	38	2.5		3	TRUE	6	PREM VI	FALSE				
280								FALSE		FALSE				0	40	3.12		3	FALSE			FALSE				
281								FALSE		FALSE									FALSE			FALSE				
282	ELTROXIN 75 MC							FALSE		FALSE				1	39	3.3		1	FALSE			FALSE				
283	USG CH	1						FALSE		FALSE				1					FALSE			FALSE				
284	USG AB	26	HEPATC	9	ELTROXIN 150 MC			TRUE	HEPAT-	FALSE				4					FALSE			FALSE				
285		19						FALSE		FALSE				0					FALSE			FALSE				
286								FALSE		FALSE									FALSE			FALSE				
287	ELTROX	3		19				FALSE		FALSE				3	40	3.01		1	FALSE			FALSE				
288	AZITHR	13	DOXOPH	24	H1N1 SWAB			FALSE		FALSE				0	39	3.4		3	FALSE			TRUE	5	MECONIUM ASPIRATION		
289	ANA,SC	26	DERM C	26	12 % AMYLASE CF			TRUE	DERM-H	FALSE				1					FALSE			FALSE				
290	AZITHR	13	MDI SEROFLOW 1					FALSE		FALSE				0					FALSE			FALSE				
291	METFOF	7		23	METHYLCOBALA			TRUE	GDM CL	TRUE	1	1	GDM GL	3					FALSE			FALSE				
292	CALCIU	26	PARACI	1				FALSE		FALSE				10	37	2.48		1	FALSE			FALSE				
293	ANA,C3	15	HCQ 200 OD					FALSE		FALSE				2	38	2.9		1	FALSE			FALSE				
294								FALSE		FALSE									FALSE			FALSE				
295	TSH, TF	1						FALSE		FALSE				2					FALSE			FALSE				
296	CARBAMAZEPIN						18	CLOBAZ	TRUE	EPILEPS	FALSE			0					FALSE			FALSE				
297	TSH, CR	5	ALDOMI	3				FALSE		FALSE				5					FALSE			FALSE				
298	ALDOMI	20	INJ. HEF	2	ELTROXIN 75,PRI			TRUE	SLE-LN	TRUE	2	1	C/C HYF	0	27	0.63		3	FALSE			TRUE	5	EXTREMELY LOW B W		
299	METFORMIN 500							TRUE	DERM-F	TRUE	1	1	FALSE L	1	39	3.16		2	FALSE			FALSE				
300	METFOF	9	ELTROXIN 50 MC					FALSE		TRUE	2	1	GERD, F	4	39	3.94		3	FALSE			FALSE				
301	NEOMERCAZOLE							FALSE		TRUE	1	1	REDUCE	0	38	3.33		1	FALSE			FALSE				
302								FALSE		FALSE									FALSE			FALSE				
303								FALSE		FALSE									FALSE			FALSE				
304								FALSE		FALSE									FALSE			FALSE				
305								FALSE		FALSE									FALSE			FALSE				
306	HB, MCV	10	OSELTA	13	MDI SEROFLO, M			TRUE	ACUTE U	FALSE				1					FALSE			FALSE				
307	STOP ELTROXIN							FALSE		FALSE				1	36	2.47		1	FALSE			FALSE				

	BM	BN	BO	BP	BQ	BR	BS	BT	BU	BV	BW	BX	BY	BZ	CA	CB	CC	CD	CE	CF	CG	CH	CI	CJ	CK
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380	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE

	CL	CM	CN	CO	CP	CQ	CR	CS	CT	CU	CV	CW	CX	CY	CZ	DA	DB	DC	DD	DE	DF	DG	DH	DI
307		3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
308		4	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
309			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
310			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
311	GENERA	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
312	PEDALE	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
313		4	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
314	DEVIATIC	2	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE
315		4	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
316		3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
317			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
318	LEFTFAC	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
319	TAKAYA	4	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE
320	RHEUMA	4	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
321	WHEEZE	2	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
322		4	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
323		2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
324	HEADAC	2	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE
325	THROAT	1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
326			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
327			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
328		4	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
329	WHEEZE,	1	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
330	COLD,S'	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
331		3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
332			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
333		1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
334		3	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
335		3	TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
336		3	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
337	COUGH,I	3	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE
338		3	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
339		4	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
340			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
341		1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
342		1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
343		1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
344	WHEEZE-	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
345		2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
346			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
347		3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
348	HEADAC	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
349		3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
350		2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
351	EPISODI	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
352		4	TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
353	BREATH	1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
354			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
355	BREATH	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
356		3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
357	WRONGREFERRA		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
358			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
359	LOC	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
360			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
361		4	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
362		2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
363		1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
364		3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
365		1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
366		4	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
367	PALPITA	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
368		4	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
369	COUGH,I	1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
370	COUGH,I	3	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
371		2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
372		4	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
373	PAPULA	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
374	SPASMO	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
375			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
376			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
377		3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
378	COUGH,'	1	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
379	LEFTFAC	2	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
380	COUGH,	3	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE

	DJ	DK	DL	DM	DN	DO	DP	DQ	DR	DS	DT	DU	DV	DW	DX
307		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
308		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
309		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
310		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
311		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
312		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
313		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
314	ALOPEC	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
315		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
316		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
317		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
318		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
319	TAKAYA	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
320	RHEUM	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
321		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
322		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
323		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
324	OLEANC	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
325		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
326		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
327		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
328	PHEOCH	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
329		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
330		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
331		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
332		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
333		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
334		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
335		FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE
336		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
337	AIHA	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
338		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
339	LEFTRA	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
340		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
341		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
342		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
343		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
344		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
345		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
346		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
347		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
348		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
349		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
350		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
351		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
352		TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
353		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
354		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
355		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
356		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
357		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
358		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
359		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
360		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
361		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
362		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
363		FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
364		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
365		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
366		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
367		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
368		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
369		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
370	SUBAOI	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
371		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
372		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
373		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
374		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
375		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
376		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
377		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
378		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
379		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
380		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE

Row	DY	DZ	EA	EB	EC	ED	EE	EF	EG	EH	EI	EJ	EK	EL	EM	EN	EO	EP	EQ	ER	ES	ET	EU	EV	EW	EX
307	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ELTROX	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
308	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ELTROX	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
309	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
310	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
311	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
312	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
313	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	UNANI	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
314	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
315	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ELTROX	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
316	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
317	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
318	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	CEFTUM	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
319	FALSE	FALSE	TRUE	THORAC	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	AZORAN	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
320	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE	FALSE	ELTROX	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
321	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
322	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
323	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
324	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	PARACI	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
325	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
326	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
327	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
328	FALSE	FALSE	TRUE	TRANSF	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
329	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE
330	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	LEVOCE	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
331	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	LABETA	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
332	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
333	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
334	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ELTROX	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
335	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	TRUE	MF SR1	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
336	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
337	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ELTROX	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
338	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	TRUE	METFOF	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
339	FALSE	FALSE	TRUE	STENTI	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	LABETA	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
340	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
341	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
342	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
343	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
344	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
345	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
346	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
347	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
348	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
349	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ELTROX	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
350	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
351	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
352	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	MIXTAR	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
353	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
354	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
355	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
356	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
357	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
358	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
359	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
360	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
361	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ELTROX	TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
362	FALSE	FALSE	TRUE	ENDOMI	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
363	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ELTROX	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
364	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
365	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
366	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ELTROX	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
367	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
368	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ELTROX	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
369	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
370	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	AMOXYC	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
371	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	T.UDCA	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
372	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ELTROX	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
373	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
374	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
375	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
376	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
377	FALSE	FALSE	FALSE		TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ELTROX	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
378	FALSE	FALSE	FALSE		TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	CEFTUM	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE
379	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
380	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE

Row	EY	EZ	FA	FB	FC	FD	FE	FF	FG	FH	FI	FJ	FK	FL	FM	FN	FO	FP	FQ	FR	FS	FT	FU	FV	FW	FX	FY	FZ	GA	GB	GC	GD	GE	GF	GG	GH	GI	GJ
307		159	66	26.1	60		110	70	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		1	EUTHYROID							26
308		155	40		80	18	110	70	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3								9
309									FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE										
310									FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE										
311		164	56	20.8	80	20	130	80	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ERYTHE	FALSE		18	PUPPP							26
312		160	84	32.8	80	16	110	60	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	ABDOM	FALSE		10	CHRONIC HTN WI					17	ADULT(	24
313		155	51	21.2			100	70	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3								9
314							100	60	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		16	?FOCAL SEIZURE							24
315		162	67	25.5	80		110	60	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3		11						9
316		160	68.6	26.8	80		150	110	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		10		11						5
317									FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE										
318		159	64.4	25.5	90	14	100	60	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		16	RESOLVED LEFT I							1
319		151	61.8	27.1	88	16	110	60	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		14	TAKAYASU'S AR							26
320		165	81	29.8	90	18	100	60	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	WRIST,	FALSE		14	RHEUM	3						24
321		151	57.3	25.1	88	16	100	60	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		13								13
322			94	37.8	80	16	110	70	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		16	SEIZURI	3						1
323		152	61	26.4	80	16	90	60	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3	CURRENTLY EUT							1
324		160	55	21.5	90	18	110	60	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		16	TENSION HEADA							26
325		153	49	20.9	80	16			FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		1	EUTHYROID							24
326									FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE										
327									FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE										
328		149	47	21.2	92	18	200	140	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		10	PHEOCH	6	LEFTVENTRICUL					5
329		169	80.5	28.2	80		112	66	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	B/L WHE	13	A/C AXACERBAT							13
330		165	81	29.8	80	16	110	70	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		19	GERD							26
331		154	76	32	60	16	120	80	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		9								4
332									FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE										
333		163	79	29.7			100	80	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3								9
334		168	70.6	25	80	20	120	80	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3	SUBCLINICAL HY							9
335		157	65	26.4			130	80	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		10		12	TYPE II DM					5
336		165	46	16.9	102	16	90	60	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		11								3
337		148	63.7	29.1	130	22	96	68	FALSE	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE		TRUE	S3,B/L(	2	AUTOIM	3						25
338		163	81	30.5	100	16	110	70	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		11								2
339	ISCHEMIC HEART DISEASE				80		142	96	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		10	SECONDARY HYF							24
340									FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE										
341					90	16	142	80	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		9	GESTAT	11						4
342		150	55	24.4	80	16	96	60	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3								9
343		157	56	22.7	110	16	90	60	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3	AUTOIM	2	PERNICIOUS AN					9
344		150	55	24.4	90	16	90	60	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	WHEEZE	13								13
345		155	65	27.1	80	16	140	88	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		10	YOUNG ONSET H'							24
346									FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE										
347			72		80	20	110	70	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3	SUBCLINICAL HY							9
348		161	68	26.2	108	18	110	60	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		19	HYPEREMESIS G							25
349		160	81.6	31.9	80		110	80	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE		3								2
350		160	103	40.2	80	16	136	70	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	HYPERF	FALSE		11								6
351	ISHEMIC	161	67.3	26	80	16	106	60	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	LEFT TH	FALSE		19	ANXIETY WITH PA							24
352		163	80	30.1	80	16	102	60	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		12								6
353		166	57	20.7			90	60	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		19	ANXIETY							24
354									FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE										
355		151	53	23.2			100	70	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		11								3
356		147	53.4	24.7	100		110	70	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		11		5	UPPER RESPIRA					6
357		160	70	27.3	80		120	60	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		1								1
358									FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE										
359		158			80	16	96	54	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		19	?PSEUDOSEIZUR							24
360									FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE										
361		161	100	39.1	80	16	120	70	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE		3								9
362		158	76	30.4	80	16	100	60	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3	SUBCLI	2	DIMORPHIC ANE					9
363		159	64	25.3	88		104	64	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3								2
364							160	110	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		10		9	C/C HYPERTENS					25
365		163	99.6	37.5	100		142	78	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		10								4
366		148	50	22.8	84	18	100	60	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3		11						9
367		148	46	21	90	18	110	60	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		2	DIMORF	6	PAROXYSMAL T/					25
368		151	56	24.6	80		120	70	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE		FALSE		3	SUBCLINICAL HY							2
369		158	60	24	90	18	84	58	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	BILAT W	5	ACUTE BRONCHI							10
370					80		120	70	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	PARAS'	5	UPPER I	6	SUBAORTIC VSD					12
371					86		120	70	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		8	CHOLESTASIS O							2
372		146	71.5	33.5	90	20	100	60	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3		19	GERD					9
373		155	65	27.1	90		90	60	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		18								26
374		157	58.8	23.9	90	16	98	54	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	SUPRAI	19	LOWER ADBO PA							26
375									FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE										
376									FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE										
377		162	61.6	23.5	80		98	68	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		3								2
378		158	53	21.2	88	14	90	60	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		5	VIRAL UPPER RE							10
379		156	46.3	19	88	14	90	60	TRUE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	BELLS S	16	LEFT LMN FACIAI							10
380		159	51	20.2	80		90	50	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE		5	UPPER I	13	COUGH VARIANT					13

GK	GL	GM	GN	GO	GP	GQ	GR	GS	GT	GU	GV	GW	GX	GY	GZ	HA	HB	HC	HD	HE	HF	HG	HH	HI	HJ
STOP ELTROXIN							FALSE		FALSE				1	36	2.47		1	FALSE			FALSE				
ELTROXIN 125 MC							FALSE		FALSE				3					FALSE			FALSE				
							FALSE		FALSE									FALSE			FALSE				
							FALSE		FALSE									FALSE			FALSE				
DERM R	24	USG AB	26	T.UDCA 150 MG T			TRUE	PUPPP	TRUE	3	1	HYPERE	0	32	1.9	1.52	3	TRUE	2	SECONI	TRUE	5			
24 HR UI	4						TRUE	NEPHRO	TRUE	1	1	GLOMEF	1	18			4	FALSE			TRUE	6			
ELTROXIN 100 MC							FALSE		FALSE				0					FALSE			FALSE				
EEG	1						FALSE		FALSE				1	39	3.22		3	FALSE			FALSE				
ELTROX	3		19				TRUE	HYPOTH	FALSE				1	38	3.29		1	FALSE			FALSE				
LABETA	6	METFOF	19				FALSE		TRUE	1	1	C/C HTN	2	26	0.67		4	TRUE	6	HELLP S	TRUE	6			
							FALSE		FALSE									FALSE			FALSE				
							FALSE		TRUE	1	1	FALSE L	0	40	3.78		3	FALSE			FALSE				
RHEUM	16	AZORAN	100 MG		17	T.WYSO	TRUE	TAKAYA	FALSE				0					FALSE			FALSE				
LFT, CRI	17	PREDNI	2	T.ELTROXIN 75,T.			TRUE	RHEUM	FALSE				3	37	3.47		1	FALSE			FALSE				
MDI ASTHALIN P							FALSE		FALSE				0	38	3		1	FALSE			FALSE				
NO ANTI	24	TSH	9	ELTROXIN 25 MC			FALSE		FALSE				3					FALSE			FALSE				
							FALSE		TRUE	1	1	THREAT	0	33	2.3		1	FALSE			TRUE	3	NURSERY		
PARACI	1						FALSE		FALSE				0	38	2.45		1	FALSE			FALSE				
TSH,TF1	1						FALSE		FALSE				1	40	2.8		3	FALSE			FALSE				
							FALSE		FALSE									FALSE			FALSE				
							FALSE		FALSE									FALSE			FALSE				
ALPHAI	19	ECOSPIRIN					TRUE	PHEOCH	TRUE	2	4	OBG, EN	0					FALSE			FALSE				
MDI SEROFLO,MI							FALSE		FALSE				0	39	3.2		3	FALSE			FALSE				
T. NEXPRO 40 MG							FALSE		FALSE				0	40	3.39		3	FALSE			FALSE				
STOP LABETALO							FALSE		FALSE				0	37	2.36		2	FALSE			FALSE				
							FALSE		FALSE									FALSE			FALSE				
ELTROXIN 25 MC							FALSE		FALSE				0	18			4	FALSE			TRUE	6	MISSED ABORTION		
ELTROXIN 50 MC							FALSE		FALSE				2					FALSE			FALSE				
LABETA	6	METFOF	7	ACTRAPID,INSU			TRUE	TYPE II D	FALSE				2					FALSE			FALSE				
							TRUE	COUGH	FALSE				0					FALSE			FALSE				
	16	AZATHI	17	PRED 3	2	ELTROX	TRUE	AIHA (H	TRUE	2	3	UTI, FAL	1	38	2.42		3	FALSE			FALSE				
METFOF	4						FALSE		FALSE				2					FALSE			FALSE				
RENAL I	5	LABETALOL 200 I					TRUE	FOR REC	TRUE	1	4	RECANA	2					FALSE			FALSE				
							FALSE		FALSE									FALSE			FALSE				
	3						FALSE		FALSE				0	36	2.5		3	FALSE			FALSE				
ELTROXIN 50 MC							FALSE		TRUE	1	1	FALSE L	1	39	2.64		3	TRUE	3		FALSE				
ELTROX	24	TSH,Hb,	23	INJ. METHYLCOB			FALSE		FALSE				4					FALSE			FALSE				
MDI FORMONIDE							TRUE	BA(AST	FALSE				0	38	2.5		1	FALSE			FALSE				
UP/UC,URINE R/							TRUE	YOUNG	FALSE				0					FALSE			FALSE				
							FALSE		FALSE									FALSE			FALSE				
ELTROXIN 25 MC							FALSE		FALSE				1					FALSE			FALSE				
							FALSE		TRUE	1	2	HYPERE	1					FALSE			FALSE				
ELTROXIN 100 MC							FALSE		FALSE				3					FALSE			FALSE				
METFOF	19						FALSE		TRUE	1	1	SEVERE	2	33	1.72		3	FALSE			TRUE	5			
TSH	1						FALSE		FALSE				0	38	3.09		1	FALSE			FALSE				
METFOF	7	MIXTAR	19				FALSE		FALSE				6					FALSE			FALSE				
TSH	1						FALSE		TRUE	1	1	ANXIETY	1	39	2.93		1	FALSE			FALSE				
							FALSE		FALSE									FALSE			FALSE				
							FALSE		FALSE									FALSE			FALSE				
							FALSE		FALSE				3					FALSE			FALSE				
METFOF	19		10	AMOXYCILLIN			FALSE		FALSE				2	38	2.89		3	FALSE			FALSE				
NO MEDICAL ISS							FALSE		FALSE				0					FALSE			FALSE				
							FALSE		FALSE									FALSE			FALSE				
EEG, ECG							TRUE	DERMA	FALSE				0	37	2.55		1	FALSE			FALSE				
							FALSE		FALSE									FALSE			FALSE				
ELTROX	19						TRUE	HYPOTH	FALSE				1	7			4	FALSE			TRUE	6	MISSED ABORTION		
ELTROX	23	METHYLCOBALA					FALSE		FALSE				2					FALSE			FALSE				
ELTROXIN 25 MC							FALSE		FALSE				1					FALSE			FALSE				
INDUCED AND DE							FALSE		TRUE	1	1	C/C HYF	0	35	1.97		2	FALSE			TRUE	5			
	19						FALSE		FALSE				1					FALSE			FALSE				
ELTROX	6	METFORMIN 250					FALSE		FALSE				2					FALSE			FALSE				
							TRUE	EPC-PA	TRUE	1	2	PAROXY	1	38	2.21		1	FALSE			FALSE				
ELTROXIN 25 MC							FALSE		FALSE				1					FALSE			FALSE				
AZITHROMYCIN							FALSE		TRUE	1	1	FALSE L	0	39	2.86		3	FALSE			FALSE				
CETRIZINE							TRUE	SUBAOI	FALSE				0	38	2.52		1	FALSE			FALSE				
T.UDCA 150 MG B							FALSE		FALSE				0	37	2.54		3	TRUE	4	E COLI	FALSE				
ELTROX	26	ANTI REFLUX ME					FALSE		FALSE				1					FALSE			FALSE				
DERMATOLOGY C							FALSE		FALSE				0					FALSE			FALSE				
OG REFERAL							FALSE		FALSE				0					FALSE			FALSE				
							FALSE		FALSE									FALSE			FALSE				
							FALSE		FALSE									FALSE			FALSE				
ELTROXIN 50 MC							FALSE		FALSE				0					FALSE			FALSE				
OSELTA	13	SYP AS	12	LEVOCET			FALSE		FALSE				0	28			4	FALSE			TRUE	6	IUD		
VANGAI	26	PHYSIOTHERAP					FALSE		FALSE				0	37	2.3		1	FALSE			FALSE				
MDI SEC	26	ENT CONSULT					TRUE	ENT-GE	FALSE				1					FALSE			FALSE				

Row	BM	BN	BO	BP	BQ	BR	BS	BT	BU	BV	BW	BX	BY	BZ	CA	CB	CC	CD	CE	CF	CG	CH	CI	CJ	CK	CL	CM	CN
380	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH,	3	FALSE
381	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	BREATH	2	FALSE
382	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
383	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
384	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	POSTPF	3	FALSE
385	FALSE	FALSE		FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		2	FALSE
386	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	RIGHTUI	3	TRUE
387	FALSE	FALSE		FALSE	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		3	FALSE
388	FALSE	FALSE		FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH,'	2	FALSE
389	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
390	FALSE	FALSE	PREVIU	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		1	TRUE
391	FALSE	FALSE		FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		1	FALSE
392	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	JOINTPA	1	TRUE
393	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH	2	FALSE
394	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	DYSPEP	2	FALSE
395	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	BREATH	2	TRUE
396	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	PRURITI	1	TRUE
397	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH,	1	FALSE
398	FALSE	FALSE		FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		1	FALSE
399	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
400	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
401	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH\	1	FALSE
402	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
403	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH,	2	FALSE
404	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH	1	FALSE
405	FALSE	FALSE		FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		1	TRUE
406	FALSE	FALSE		FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		3	FALSE
407	FALSE	FALSE		FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		4	TRUE
408	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	HEADAC	3	FALSE
409	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
410	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
411	FALSE	FALSE		FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		3	TRUE
412	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		3	TRUE
413	FALSE	FALSE		FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		2	TRUE
414	FALSE	FALSE		TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		2	FALSE
415	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
416	FALSE	FALSE		FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		3	FALSE
417	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	GIDDINE	3	FALSE
418	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	COUGH,	1	FALSE
419	TRUE	TRUE	2MISSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	TITRATI(	4	TRUE
420	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
421	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	FALSE	FALSE			FALSE
422	FALSE	FALSE		FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		3	TRUE
423	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
424	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
425	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
426	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
427	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
428	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
429	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	TRUE	OPTIMISATION OI		TRUE
430	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		3	TRUE
431	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
432	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
433	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
434	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
435	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
436	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
437	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
438	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
439	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
440	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
441	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
442	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
443	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
444	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
445	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE
446	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE			FALSE

Row	CO	CP	CQ	CR	CS	CT	CU	CV	CW	CX	CY	CZ	DA	DB	DC	DD	DE	DF	DG	DH	DI	DJ	DK	DL	DM	DN	DO	DP	DQ	DR	DS	DT	DU	DV	DW	DX
380	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
381	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
382	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
383	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
384	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
385	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
386	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	NMO SP	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
387	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
388	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
389	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
390	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
391	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
392	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	SLE,LN(	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
393	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
394	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
395	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	RHEUM(	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
396	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	DISCOI(	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
397	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
398	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
399	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
400	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
401	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
402	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
403	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
404	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
405	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
406	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
407	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
408	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
409	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
410	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
411	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
412	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
413	FALSE	FALSE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
414	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		TRUE	TRUE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
415	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
416	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
417	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE		FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE	FALSE
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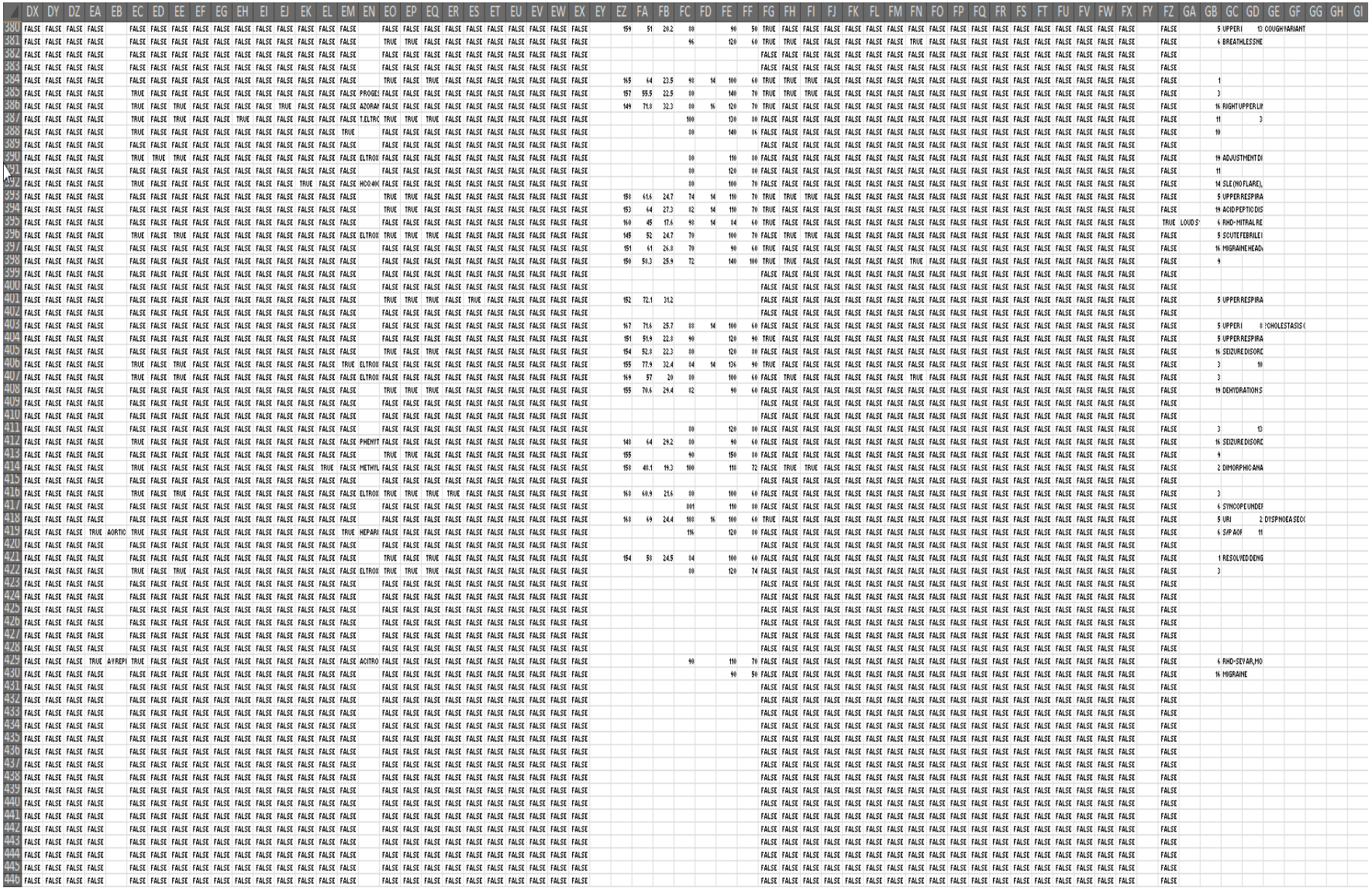

	GJ	GK	GL	GM	GN	GO	GP	GQ	GR	GS	GT	GU	GV	GW	GX	GY	GZ	HA	HB	HC	HD	HE	HF
380	13	MDI SEC	26	ENT CONSULT					TRUE	ENT- GE	FALSE				1					FALSE			FALSE
381	24	ECHO, 24 HR URII							FALSE		TRUE	1	1	GESTAT	1	37	2.87		1	FALSE			FALSE
382									FALSE		FALSE									FALSE			FALSE
383									FALSE		FALSE									FALSE			FALSE
384	1								FALSE		FALSE				0					FALSE			FALSE
385	9	ELTROXIN 50 MC							FALSE		FALSE				2					FALSE			FALSE
386	25	FOR PULSE METI							FALSE		FALSE				0					FALSE			FALSE
387	6	METFOF	9	ELTROXIN					FALSE		FALSE				2	39	2.86		2	FALSE			FALSE
388	5	T.LABET	4						FALSE		FALSE				1					FALSE			FALSE
389									FALSE		FALSE									FALSE			FALSE
390	26	PSYCHIATRY CO							TRUE	ADJUST	TRUE	1	1	FALSE L	0					FALSE			FALSE
391	3								FALSE		FALSE				0					FALSE			FALSE
392	2	HCQ 400 MG OD							FALSE		FALSE				0					FALSE			FALSE
393	12	T. CETRIZINE 10 M							FALSE		FALSE				0					FALSE			FALSE
394	26	PANTOPRAZOLE							FALSE		FALSE				0					FALSE			FALSE
395	24	ECG, EC	26	REFER TO CARDI			26	TORSAI	TRUE	CARDIO	FALSE				2					FALSE			FALSE
396	24	CBC, TS	26	DERM CONSULT					FALSE		FALSE				1					FALSE			FALSE
397	26	TRYPTOMER 10 M							FALSE		FALSE									FALSE			FALSE
398	5	LABETO	24	ECG, UP/UC, CRE					FALSE		TRUE	1	1	SEVERE	0	28	0.89		3	FALSE			TRUE
399									FALSE		FALSE									FALSE			FALSE
400									FALSE		FALSE									FALSE			FALSE
401	24	H1N1 SW	10	OSELTAMIVIR 75					FALSE		FALSE				0	37	3.12		3	FALSE			FALSE
402									FALSE		FALSE									FALSE			FALSE
403	24	TC,DC,T	13	ASTHAL	12	LEVOCET			FALSE		FALSE				0					FALSE			FALSE
404	12	CETRIZINE							FALSE		FALSE				0	40	2.94		2	FALSE			FALSE
405	18	LEVIPIL 500 MG B							FALSE		TRUE	1	1	GDM- GI	0					FALSE			FALSE
406	9	ELTROX	4						FALSE		FALSE				1					FALSE			FALSE
407	9	ELTROXIN 100 MC							FALSE		FALSE				1					FALSE			FALSE
408	1	HYDRATION							FALSE		FALSE									FALSE			FALSE
409									FALSE		FALSE									FALSE			FALSE
410									FALSE		FALSE									FALSE			FALSE
411	9	ELTROX	13	MDI ASTHALIN					FALSE		FALSE				3					FALSE			FALSE
412	24	PHENYT	18	LEVIPIL 1 GM BD					FALSE		FALSE				3					FALSE			FALSE
413	5	LABETALOL 100 I							FALSE		FALSE				0					FALSE			FALSE
414	2	AUTRIN	19						FALSE		FALSE				1					FALSE			FALSE
415									FALSE		FALSE									FALSE			FALSE
416	9	ELTROXIN 75 MC							FALSE		FALSE				1					FALSE			FALSE
417	24	ECG, EE	26	CARDIO CONSUL					FALSE		FALSE				0					FALSE			FALSE
418	26	BETADII	24	CBC, CF	13	SYP. ASTHALIN 5			FALSE		FALSE				1	38	2.88		1	FALSE			FALSE
419	24	RPT AP	20	HEPARIN 8000 U					TRUE	S/P AVF	TRUE	1	1	SHIFTIN	4					FALSE			FALSE
420									FALSE		FALSE									FALSE			FALSE
421	1								FALSE		TRUE	1	2	DENGUE	1	39	2.64		1	FALSE			FALSE
422	9	ELTROXIN 100 MC							FALSE		FALSE				0					FALSE			FALSE
423									FALSE		FALSE									FALSE			FALSE
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426									FALSE		FALSE									FALSE			FALSE
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428									FALSE		FALSE									FALSE			FALSE
429	24	INR							FALSE		FALSE				0	40	3		3	FALSE			FALSE
430	14	PARACETAMOL I							FALSE		TRUE	1	1	HYPERE	0					FALSE			FALSE
431									FALSE		FALSE									FALSE			FALSE
432									FALSE		FALSE									FALSE			FALSE
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